



**BUILDING PERMIT APPLICATION**

City of Reno-Building & Safety Division  
Community Development Department  
1 E. 1st Street– P.O. BOX 1900 RENO, NV 89505  
(775) 334-2063

**SOLAR/EV CHARGERS**

Record No.: \_\_\_\_\_

Received By: \_\_\_\_\_

Date Received: \_\_\_\_\_

**To pay online and to check the status of your permit, create an ACA account through [www.onenv.us](http://www.onenv.us).**

RESIDENTIAL (One- and Two- Family Dwellings)

COMMERCIAL

SOLAR

ELECTRIC VEHICLE CHARGER

PARCEL NUMBER:

ADDRESS:

UNIT:

**Applicant Information:** (Person to Contact Regarding This Permit)

Business or Organization Name: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Applicant Phone: \_\_\_\_\_

Applicant Email: \_\_\_\_\_

**Owner Information:**

OWNER/BUILDER PERMIT  YES (Owner/Builder Affidavit Required)  NO

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Phone No.: \_\_\_\_\_

**General Contractor Information:**

Company Name : \_\_\_\_\_ Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

Nevada License # \_\_\_\_\_ Classification \_\_\_\_\_ City License # \_\_\_\_\_

**Design Professionals:**

Project Engineer (Name): \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Project Information:**

Project Valuation (Cost of Labor and Materials): \_\_\_\_\_

**SOLAR**

System Location:  GROUND  ROOF

Existing Roof Retrofit Required:  YES  NO

Number of Modules: \_\_\_\_\_

Size of Existing Service Panel: \_\_\_\_\_ Amps

Existing Electrical Service Upgrade or Change Out :  YES  NO

Size of New Service Panel : \_\_\_\_\_ Amps

Battery Storage System:  NEW  EXISTING  NONE

**EV CHARGER**

Charger Location:  INTERIOR  EXTERIOR

Number of Chargers: \_\_\_\_\_

Size of Existing Service Panel: \_\_\_\_\_ Amps

Existing Electrical Service Upgrade or Change Out:  YES  NO

Size of New Service Panel : \_\_\_\_\_ Amps

Applicant Signature: \_\_\_\_\_ Applicant Name (Printed): \_\_\_\_\_