



# MARYSVILLE

WASHINGTON

## COMMUNITY DEVELOPMENT DEPARTMENT PV SYSTEM (SOLAR PANEL) PERMIT APPLICATION

Permit Submittal Hours Are Monday – Friday: 7:30 am to 4:00pm.

FOR OFFICE USE ONLY
Permit No. _____

***THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT COMPLETED SUBMITTAL REQUIREMENTS***

<b>Owner Name:</b>		Telephone:	
Address:	City:	State:	Zip:
Cell Phone:		Email:	
<b>Applicant Name:</b>		Telephone:	
Address:	City:	State:	Zip:
Cell Phone:		Email:	
<b>Contractor Name:</b>		Telephone:	
Address:	City:	State:	Zip:
Cell Phone:		Email:	
Contractors L & I No:		City Business License No:	

**PROPERTY INFORMATION**

<b>Tax ID No.(14digits):</b>	<b>Site Address:</b>
<b>Zoning:</b>	<b>Plat:</b>
	<b>Lot:</b>

Detailed Description of proposal/work:

Permit Application Checklist

- Electronically Submitted Plans
- Electronically Submitted Energy Calculations
- Electronically Submitted Electrical Permit Application
- PUD Application or Approval Letter

**Project Valuation:** \$ \_\_\_\_\_

This permit is issued by the Building Official and under the provisions of the International Building Code and the International Residential Code, shall expire by limitation and become null & void if the building or work authorized by such permit is not commenced within 180 days. By affixing my signature, I hereby certify that I am the owner of the property for which this permit is issued or an authorized representative of the owner. All provisions of laws and ordinances governing this type of work will be complied with, whether specified herein or not, including routine calls for inspections.

X \_\_\_\_\_  
(Signature of Owner or Agent) \_\_\_\_\_ Date \_\_\_\_\_

Contact(please print): \_\_\_\_\_ Contact phone: \_\_\_\_\_

Comments: \_\_\_\_\_

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