

Solar Panel Permit Application

PROJECT ADDRESS: _____ **Zoning District:** _____

Applicant _____

Owner _____

Address _____

Address _____

City _____ State _____ Zip Code _____

City _____ State _____ Zip _____

Person to contact _____

Phone # _____

Phone # _____

Email _____

Email _____

Check if same as applicant information

** Please completely fill out the contact information for the owner if different than the applicant.*

Solar Panel Information:

Solar Panel Type: Roof-Mounted Ground-Mounted

The distance between the roof and the uppermost portion of the panels: _____

Height of panels (Ground Panels): _____

Solar Panel(s) will be visible from a street: Yes No

Read the statements below and sign to acknowledge agreement.

I hereby attest that all information on this application is, to the best of my knowledge, true and accurate. Additionally, I hereby grant permission for the City of Riverside Zoning Administrator to enter upon the above-mentioned property (or as described in the attachment) for the purposes of gathering information related to this application.

Owner Signature: _____ **Date:** _____

Applicant Signature: _____ **Date:** _____

Checklist:

- Site Plan (drawn to a reasonable scale)
- \$40** Application Fee (Card, Cash or Check made payable to the City of Riverside)
- Work without a Permit Penalty: Double Total Permit Fee

OFFICAL USE ONLY

Permit No _____

Approved _____ Date _____

Intake Staff _____ Date _____

Denied _____ Date _____

Comments _____ SWPA: _____

Parcel ID _____

SAMPLE SITE PLAN



FULL SITE ADDRESS
Scale: e.g. 1' = 10'
R-3 Residential District

