# Submittal Checklist for Expedited PV Solar Panel Installations

**Electrical Permit #:** (staff use) ____________________________

This submittal checklist shall be used for electrical permits for residential rooftop solar PV panel installations. Permits that meet the submittal requirements and qualifications below will be reviewed and approved for electrical permit in 1 to 3 Business days.

<table>
<thead>
<tr>
<th>Contractor Information</th>
<th>Property Owner Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Contractor:</td>
<td>Name of Property Owner</td>
</tr>
<tr>
<td>Business Street Address:</td>
<td>Suite #:</td>
</tr>
<tr>
<td>Contact Person:</td>
<td>Phone #</td>
</tr>
<tr>
<td>Contractor Email:</td>
<td>Owner's Email</td>
</tr>
</tbody>
</table>

**Submittal Items**  
Please provide the following Documents for Review attached behind this sheet

1. Is the Project in a City of Decatur Historic District? [ ] Yes [ ] No.  
   *If Yes, please attach either the Certificate of Exemption or Certificate of Appropriateness to this application.  
   *note: projects that are submitted and have not received historic preservation approval may not receive expedited plan review*  

2. **Electrical Permit (1 copy)** Please attach the Completed Electrical Permit Application.

3. State of Georgia Electrical Contractor License and Business License (1 Copy each)

4. **Payment (1 Copy)** Please attach a check for the permit fee computed on the electrical permit application completed above.

5. **Panel/ Array Wiring Diagram (2 Copies)** Please attach a project specific drawing showing wiring, array connections and disconnects.

6. **Rooftop Layout (2 copies)** Please attach a project specific drawing showing the rooftop location(s) for solar panel array(s). Rooftop layout must orient the building to the street associated with that property’s address.

7. **Existing Roof Analysis** (Note: Roof Structures not meeting structural design criteria must advance to item 8 below)
   - Date of Roof Construction: _______
   - Roof Material (Metal, asphalt, etc): ___________________________ # of Layers__________
   - Roof Type (Circle): Rafters Trusses Roof Height to Top of Highest Ridge __________________
   - Rafter Size: _______ Rafter/ Truss Spacing: __________ Sheathing Type __________
   - Ceiling Joist Size and Spacing ___________________________ and/or Collar Tie Size and Spacing ________________________
   - Maximum Unsupported Rafter Span: _______ Feet, _______ Inches
   - Ridge Type (Circle): Beam Board Ridge Size __________________

I HEREBY CERTIFY THAT I HAVE COMPLETED AN EXISTING CONDITIONS ROOF ANALYSIS AND CAN ATTEST THAT THE INFORMATION PROVIDED ABOVE IS ACCURATE. I FURTHER CERTIFY THAT THE INSTALLATION SHALL BE IN ACCORDANCE WITH THE CRITERIA SET FORTH IN THE STRUCTURAL ANALYSIS PROVIDED BY STARLING, MADISON LOFQUIST, INC DATED DECEMBER 4, 2016

Contractor Signature: ____________________________ Date: ______________

8. **Engineer’s Letter/ Details:** (ONLY as required-2 copies): If existing conditions require an engineer’s analysis please provide a letter and/or details signed and sealed by a registered (GA) professional engineer.

**Departmental Approval:** Approval for Expedited Solar Panel Installation by the Office of the Building Official.

Approved By: ____________________________ Date: ______________

Created November 2016