



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.

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: _____

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): _____