LYNNWOOD WASHINGTON
DEVELOPMENT & BUSINESS SERVICES

Building Permit Series

Solar System Permits

Listed below is the information that needs to be provided in order to submit a complete application for a ***solar system*** building permit. Staff will not process incomplete applications.

SUBMITTAL REQUIREMENTS

- ☐ Completed and signed building permit application form, including proof of a valid State Contractor's License and a City of Lynnwood Business License, if applicable.
- ☐ Completed and signed electrical permit application, including proof of a valid State Contractor's License and a City of Lynnwood Business License, if applicable.
- ☐ Completed submittal package to include:
  - Checklist;
  - Site Plan;
  - Electrical Diagram;
  - Specification Sheets; and
  - Installation Manuals, if available.

ADDITIONAL INFORMATION

- ☐ Review times will vary based on the type of system being installed.

NOTE

For answers to specific questions, please contact the Building Official at (425) 670-5415 or the Electrical Inspector at (425) 670-5416.

LYNNWOOD WASHINGTON
DEVELOPMENT & BUSINESS SERVICES

Building Permit Application

Permit Number: _____

Assoc. Permits: _____

B

Please read and follow all instructions on your application, submittal checklists and/or applicable supplemental forms carefully. Staff will not process incomplete applications. Please print or type legibly.

Please complete as applicable (check all that apply):

☐ Residential	☐ New Construction	☐ Demolition*	☐ Plumbing	☐ Repair
☐ Non-Residential	☐ Alteration	☐ SPCC*	☐ Mechanical	☐ Sign
☐ Tenant Improvement	☐ Addition	☐ SWPPP*	☐ Fire Suppression/Sprinkler	

***SPCC (Spill Prevention, Control and Countermeasures Plan)**
***SWPPP (Stormwater Pollution Prevention Plan)**
The plans can be obtained online at http://www.ci.lynnwood.wa.us/City-Services/Environmental--Surface-Water-and-Storm-Water/Environmental-Documents-and-Reports.htm.

Description of Work:

CONTRACT VALUE (EXCLUDING SALES TAX, SEE "FEES" BELOW): $

Occupant Name:			Phone:
Site Address:			Suite Number(s):
City:	State:	Zip:	Fax:
Email:			

Property Owner:			Phone:
Address:			Cell:
City:	State:	Zip:	Fax:
E-Mail:			

Architect/Engineer Name:			Phone:
Address:			Cell:
City:	State:	Zip:	Fax:
E-Mail:			

Contractor Name:			Phone:
Address:			Cell:
City:	State:	Zip:	Fax:
State Contractor's License Number:		City Business License Number:	
E-Mail:			

Primary Contact Name:			Phone:
Address:			Cell:
City:	Fax:	Zip:	
E-Mail:			

ALL RESIDENTIAL APPLICANTS MUST NOTE THE NUMBER OF EACH TYPE OF FIXTURE BELOW

PLUMBING			
No.	**Type of Fixture**	**Fee**	**Total**
	Water Closet (Toilet)	$19.00	
	Lavatory	$19.00	
	Kitchen Sink/Disposal	$19.00	
	Dishwasher	$19.00	
	Lawn Sprinkler System	$19.00	
	Clothes Washer	$19.00	
	Drainage	$19.00	
	Vacuum Breakers	$19.00	
	Floor Sink	$19.00	
	Bath Tub	$19.00	
	Shower	$19.00	
	Laundry Tray	$19.00	
	Water Heater	$19.00	
	Hose Bibs	$19.00	
	Floor Drain	$19.00	
	Water Piping	$19.00	
	Backflow Devices	$32.00	
	Urinal	$19.00	
	Rainwater System	$19.00	
	Other:	+++	
	Permit Processing Fee	$38.00	$38.00
		TOTAL	
PLUMBING CONTRACT VALUE: $			

MECHANICAL			
No.	**Type of Fixture**	**Fee**	**Total**
	Furnace (up to 100,000 BTU)	$25.00	
	Furnace (100,001 BTU or above)	$38.00	
	Heat Pump/AC up to 3hp/100,000 BTU	$32.00	
	Heat Pump/AC up to 15hp/100,000 BTU	$50.00	
	Heat Pump/AC up to 30hp/1,000,000 BTU	$69.00	
	Heat Pump/AC up to 50hp/1,750,000 BTU	$88.00	
	Heat Pump/AC over 50hp/1,750,000 BTU	$107.00	
	Ventilation Fan	$13.00	
	Ventilation System	$25.00	
	Exhaust Hood	$32.00	
	Gas Stove Top	$32.00	
	Gas Water Heater	$32.00	
	Gas Dryer	$32.00	
	Gas Piping	$25.00	
	Other:	+++	
	Permit Processing Fee	$38.00	$38.00
		TOTAL	
MECHANICAL CONTRACT VALUE: $			

+++ FEES: For specific fee information, see LMC 3.104 or check the fee schedule available online or at our office.

Fees for ***single-family or duplex residential buildings*** are calculated by the number of fixtures (see above).

Fees for ***all other buildings, including but not limited to commercial, institutional, or residential complexes of 3 units or more***, are all calculated by contract amount.

NOTICE

This permit becomes null and void if the authorized work has not been inspected by this department within 180 calendar days of issuance or for a period of 180 calendar days from the last inspection. The total life of this permit is limited to a maximum of 540 calendar days, provided it has not expired under the restrictions above. One extension request for 180 calendar days may be granted if a written request is submitted to the building official showing just cause before the expiration date.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

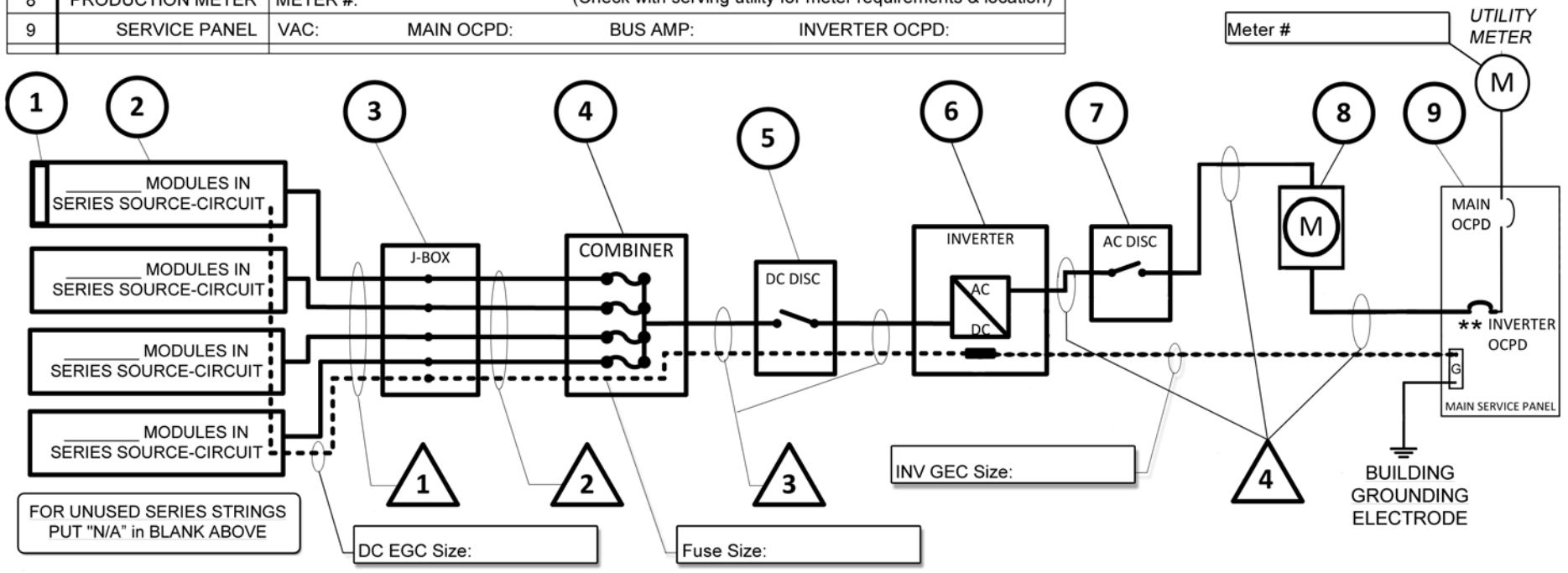
Print Name of Owner/Agent: _____

Signature of Owner/Agent: _____ Date: _____

EQUIPMENT SCHEDULE

TAG					
1	SOLAR PV MODULE	MAKE:		MODEL:	(Attach Cut Sheet - See notes for ratings)
2	PV ARRAY	WEIGHT:	HEIGHT FROM ROOF:		(Attach cut sheet of mounting system)
3	J-BOX	LENGTH:	WIDTH:	HEIGHT:	NEMA RATING:
4	COMBINER	MAKE:		MODEL:	(Attach cut sheet)
5	DC DISCONNECT	VDC:	DC AMP:	MAKE:	
6	DC/AC INVERTER	MAKE:			(Attach cut sheet - See notes for ratings)
7	AC DISCONNECT	VAC:	AMPS:	MODEL:	
8	PRODUCTION METER	METER #:			(Check with serving utility for meter requirements & location)
9	SERVICE PANEL	VAC:	MAIN OCPD:	BUS AMP:	INVERTER OCPD:

Contractor - Installer Information	
Permit #:	*Date:*
Name:	
Address:	
Contact Name:	
Contact Phone:	
Email:	



TAG	Conductor Insulation Type	CU/AL	Conductors			*Derated Amps	Raceway		Ambient Temp		Distance off Roof	
			Size	Amps	Num		Size	Type	Roof	Attic		
1												
2												
3												
4												

* Note: Derating of conductors based on number of conductors in raceway, ambient temp and distance off roof where applicable. (NEC 310.15)
** Note: Conductors and overcurrent devices shall be sized to carry not less than 125 percent of the maximum currents. (NEC 690.8(B))

Standard Electrical Diagram - Residential Small Scale PV System
Central Inverter Systems

THIS PLAN MUST BE PROVIDED TO THE INSPECTOR AT THE JOB SITE

Site Name:

Site Address:

This plan is NOT intended to be used with micro inverters or transformer-less inverters. Conductors, where installed outdoors in raceways shall be "W" rated and have an insulation rating of 90 deg C.

Rev - 02/21/2013

NOTES for Residential Small Scale PV System Electrical Diagram	
Permit #:	Date:
Contractor:	
Job Address:	
Contact Name:	
Contact Phone:	

SIGNS

SIGN FOR DC DISCONNECT

PHOTOVOLTAIC POWER SOURCE	
RATED MPP CURRENT	A
RATED MPP VOLTAGE	V
MAX SYSTEM VOLTAGE	V
MAX CIRCUIT CURRENT	A
WARNING: ELECTRICAL SHOCK HAZARD–LINE AND LOAD MAY BE ENERGIZED IN OPEN POSITION	

SIGN FOR INVERTER OCPD AND AC DISCONNECT (IF USED)

SOLAR PV SYSTEM AC POINT OF CONNECTION	
AC OUTPUT CURRENT	A
NOMINAL AC VOLTAGE	V
THIS PANEL FED BY MULTIPLE SOURCES (UTILITY AND SOLAR)	

PV MODULE RATINGS

MODULE MAKE	
MODULE MODEL	

MAX POWER-POINT CURRENT (I_{MP})	A
MAX POWER-POINT VOLTAGE (V_{MP})	V
OPEN-CIRCUIT VOLTAGE (V_{OC})	V
SHORT-CIRCUIT CURRENT (I_{SC})	A
MAX SERIES FUSE (OCPD)	A
MAXIMUM POWER (P_{MAX})	W
MAX VOLTAGE (TYP 600V_{DC})	V
VOC TEMP COEFF (mV/ºC☐ or %/ºC☐)	
IF COEFF SUPPLIED, CIRCLE UNITS	

INVERTER RATINGS

INVERTER MAKE	
INVERTER MODEL	

MAX DC VOLT RATING	V
MAX POWER @ 40ºC	W
NOMINAL AC VOLTAGE	V
MAX AC CURRENT	A
MAX OCPD RATING	A

LOWEST EXPECTED AMBIENT TEMP:	ºC
HIGHEST CONTINUOUS TEMPERATURE:	ºC

NEC 690.8(B) Photovoltaic system currents shall be considered continuous.

NEC 690.8(B)(1) The circuit conductors and overcurrent devices shall be sized to carry not less than125 percent of the maximum currents calculated in 690.8(A).

Exception: Circuits containing an assembly, together with its overcurrent device(s), that is listed for continuous operation at 100 percent of its rating shall be permitted to be utilized at 100 percent of its rating.

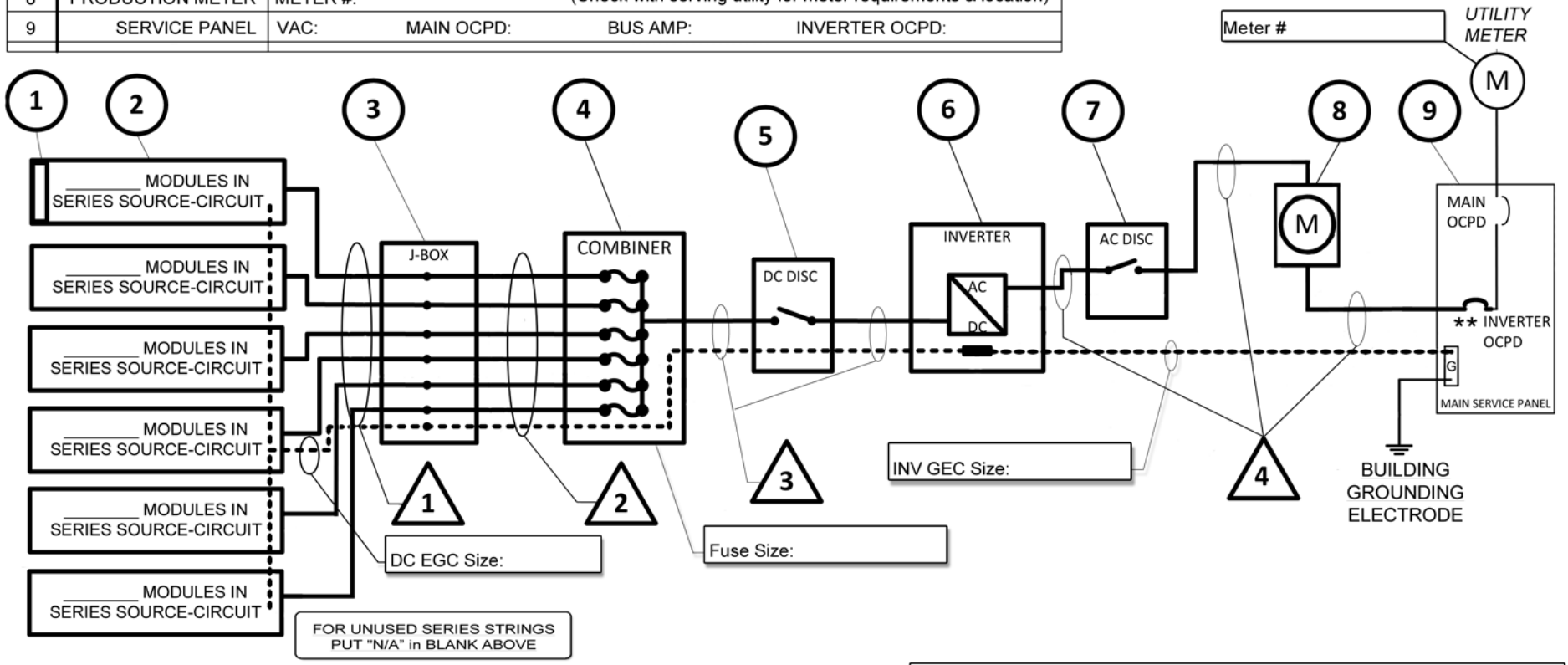
All signage and markings shall be a phenolic or metalic plate or other similar material in block letters 1/4 inch or greater in height, and suitable for the environment. Letters and background shall be in contrasting colors. Screws, rivets or other approved means shall be used to affix plates to equipment.

INVERTER		PANELBOARD	
Maximum Current	OCPD Size	Main Bus	Main OCPD
56 amps	70 amps	225 amps	200 amps
36 amps	45 amps	225 amps	225 amps
33 amps	40 amps	200 amps	200 amps
24 amps	30 amps	150 amps	150 amps
20 amps	25 amps	125 amps	125 amps
16 amps	20 amps	100 amps	100 amps

EQUIPMENT SCHEDULE

TAG					
1	SOLAR PV MODULE	MAKE:	MODEL:		(Attach Cut Sheet - See notes for ratings)
2	PV ARRAY	WEIGHT:	HEIGHT FROM ROOF:		(Attach cut sheet of mounting system)
3	J-BOX	LENGTH:	WIDTH:	HEIGHT:	NEMA RATING:
4	COMBINER	MAKE:	MODEL:		(Attach cut sheet)
5	DC DISCONNECT	VDC:	DC AMP:	MAKE:	
6	DC/AC INVERTER	MAKE:			(Attach cut sheet - See notes for ratings)
7	AC DISCONNECT	VAC:	AMPS:	MODEL:	
8	PRODUCTION METER	METER #:			(Check with serving utility for meter requirements & location)
9	SERVICE PANEL	VAC:	MAIN OCPD:	BUS AMP:	INVERTER OCPD:

Contractor - Installer Information	
Permit #:	*Date:*
Name:	
Address:	
Contact Name:	
Contact Phone:	
Email:	



TAG	Conductor Insulation Type	CU/AL	Conductors			*Derated Amps	Raceway		Ambient Temp		Distance off Roof	
			Size	Amps	Num		Size	Type	Roof	Attic		
1												
2												
3												
4												

* Note: Derating of conductors based on number of conductors in raceway, ambient temp and distance off roof where applicable. (NEC 310.15)

** Note: Conductors and overcurrent devices shall be sized to carry not less than 125 percent of the maximum currents. (NEC 690.8(B))

Standard Electrical Diagram - Residential Small Scale PV System
Central Inverter Systems

THIS PLAN MUST BE PROVIDED TO THE INSPECTOR AT THE JOB SITE

Site Name:

Site Address:

This plan is NOT intended to be used with micro inverters or transformer-less inverters. Conductors, where installed outdoors in raceways shall be "W" rated and have an insulation rating of 90 deg C.

Rev - 02/23/2013

NOTES for Residential Small Scale PV System Electrical Diagram	
Permit #:	Date:
Contractor:	
Job Address:	
Contact Name:	
Contact Phone:	

SIGNS

SIGN FOR DC DISCONNECT

PHOTOVOLTAIC POWER SOURCE	
RATED MPP CURRENT	A
RATED MPP VOLTAGE	V
MAX SYSTEM VOLTAGE	V
MAX CIRCUIT CURRENT	A
WARNING: ELECTRICAL SHOCK HAZARD–LINE AND LOAD MAY BE ENERGIZED IN OPEN POSITION	

SIGN FOR INVERTER OCPD AND AC DISCONNECT (IF USED)

SOLAR PV SYSTEM AC POINT OF CONNECTION	
AC OUTPUT CURRENT	A
NOMINAL AC VOLTAGE	V
THIS PANEL FED BY MULTIPLE SOURCES (UTILITY AND SOLAR)	

PV MODULE RATINGS

MODULE MAKE	
MODULE MODEL	

MAX POWER-POINT CURRENT (I_{MP})	A
MAX POWER-POINT VOLTAGE (V_{MP})	V
OPEN-CIRCUIT VOLTAGE (V_{OC})	V
SHORT-CIRCUIT CURRENT (I_{SC})	A
MAX SERIES FUSE (OCPD)	A
MAXIMUM POWER (P_{MAX})	W
MAX VOLTAGE (TYP 600V_{DC})	V
VOC TEMP COEFF (mV/ºC☐ or %/ºC☐)	
IF COEFF SUPPLIED, CIRCLE UNITS	

INVERTER RATINGS

INVERTER MAKE	
INVERTER MODEL	

MAX DC VOLT RATING	V
MAX POWER @ 40ºC	W
NOMINAL AC VOLTAGE	V
MAX AC CURRENT	A
MAX OCPD RATING	A

LOWEST EXPECTED AMBIENT TEMP:	ºC
HIGHEST CONTINUOUS TEMPERATURE:	ºC

NEC 690.8(B) Photovoltaic system currents shall be considered continuous.

NEC 690.8(B)(1) The circuit conductors and overcurrent devices shall be sized to carry not less than125 percent of the maximum currents calculated in 690.8(A).

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20 amps	25 amps	125 amps	125 amps
16 amps	20 amps	100 amps	100 amps

SITE PLAN RESIDENTIAL SMALL SCALE PV SYSTEM		Provide roof outline with location of all PV panels, j-box, combiner and DC disconnect. If required, show fire code access pathways.	
Permit #:	Date:	Contractor:	Contrator Phone:
Job Address:		Contact Name:	Contact Phone:

LYNNWOOD WASHINGTON
DEVELOPMENT & BUSINESS SERVICES

Electrical Permit Application

Permit Number: _____

Assoc. Permits: _____

E

Please read and follow all instructions on your application, submittal checklists and/or applicable supplemental forms carefully. Staff will not process incomplete applications. Please print or type legibly.

Site Address/Subdivision & Lot No.:			Suite Number(s):
Property Owner/Occupant:			Phone:
Address:			Cell:
City:	State:	Zip:	Fax:
E-Mail:			
Contractor Name:			Phone:
Address:			Cell:
City:	State:	Zip:	Fax:
State Contractor's License No.:		City Business License No.:	
Contact Person, if different:			Phone:
E-Mail:			Cell:

FAIR MARKET VALUE FOR FIXTURES, MATERIALS, AND LABOR: $

Specific Type of Electrical Work (Plan review required for all unless otherwise noted):

☐ Single-Family or Duplex (no plan review required), Service Size: _____ amps

☐ Multi-Family ☐ Commercial ☐ Generator ☐ Medical, Institutional or School Facility

Please complete as applicable (check, circle, and/or fill in):

☐ New Building: _____ amps	☐ Addition: _____ amps	☐ Tenant Improvement
☐ Temporary Power: _____ amps	☐ Service Change: _____ amps	☐ No. New Circuits: ___
☐ Limited Low Voltage	☐ Portable Classroom/Mobile Home	☐ Sign
☐ Pool/Hot Tub, Sauna or Spa	☐ Carnival (No. Concessions): _____	☐ Fire Alarm

Description of Work:

NOTICE

This permit becomes null and void if the authorized work has not been inspected by this department within 180 calendar days of issuance or for a period of 180 calendar days from the last inspection. The total life of this permit is limited to a maximum of 540 calendar days, provided it has not expired under the restrictions above. One extension request for 180 calendar days may be granted if a written request is submitted to the building official showing just cause before the expiration date.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Print Name of Owner/Agent: _____

Signature of Owner/Agent: _____ Date: _____