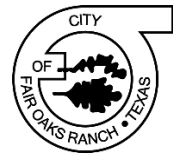


**CITY OF FAIR OAKS RANCH**  
 7286 Dietz Elkhorn  
 Fair Oaks Ranch, TX  
 PH: (210)698-0900 FAX: (210)698-3565  
[bcodes@fairoaksranchtx.org](mailto:bcodes@fairoaksranchtx.org)  
[www.fairoaksranchtx.org](http://www.fairoaksranchtx.org)



**SOLAR PERMIT APPLICATION**

Project Address: \_\_\_\_\_ Unit: \_\_\_\_\_ Lot: \_\_\_\_\_  
 (Street)

Owner Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address (if different than above): \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

**Number of Panels:** \_\_\_\_\_

Applicant: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Applicant email: \_\_\_\_\_

General Contractor: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

**(OFFICE USE ONLY)** City Registration #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Electrical Contractor: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

**(OFFICE USE ONLY)** City Registration #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

**Notes:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
 Signature of Contractor/Agent Date

**\*\*\*\*\* OFFICE USE ONLY \*\*\*\*\***

# of Panels \_\_\_\_\_ x \$8.00 = \$ \_\_\_\_\_

<p><b>INSPECTIONS REQUIRED:</b></p> <p><input type="checkbox"/> FINAL</p>	<p>DATE REC'D: _____ BY: _____</p> <p>APPROVED BY: _____</p> <p>DATE APPROVED: _____</p>
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