

APPLICATION FOR ELECTRICAL PERMIT – SOLAR*

*Please note that for ground-mounted solar panels, an **accessory/foundation permit** must be issued prior to obtaining an electrical permit.

PERMIT #: BD _____	DATE: _____
PROPERTY ADDRESS: _____	
OWNER NAME: _____	PHONE: _____
MAILING ADDRESS: _____	

Please complete the chart below, noting the quantity of each item on the left, and calculating the fees on the right. Find our fee schedule at the link below: <https://southbend.in.gov/wp-content/uploads/2018/07/Fee-Schedule-2021.pdf>

Qty.	Description	Amount	Fees Owed
	Switchboards & Panel Boards (Sub Panels) (new and replaced)		
	60 amp. _____		
	100 amp. _____		
	200 amp. _____		
	400 amp. _____		
	600 amp. _____		
	Over 600 amp. Up to 2,000 amp. _____		
	Over 2,000 amp. _____		
	Circuits, each (new and replaced)		
	Back-up generator: 10 kVa or less _____ Over 10 kVa _____		
	Reset, relocation, and reconnection		
	Other: _____		
MINIMUM PERMIT FEE: \$40.00 *See Fee Schedule for breakdown of fees		Total:	

AEP Work Order Number: _____

IF A SERVICE PROVIDER WILL BE INVOLVED TO CONNECT ELECTRICAL SERVICE, AN ADDITIONAL \$40 RECONNECT FEE WILL BE CHARGED.

Additional items	Response		
Capacity (kilowatt (kW) DC), i.e. 8.520 kW			
Owner Type	<input type="checkbox"/> residential	<input type="checkbox"/> commercial	<input type="checkbox"/> industrial
Solar Installer (if different from electrical contractor)			
Electric Utility			
Connection Type	<input type="checkbox"/> grid-tied with battery back-up	<input type="checkbox"/> grid-tied, no battery back-up	<input type="checkbox"/> off-grid (no utility connection)
Comments			

It is hereby certified that the work herein called for is in accordance with the provisions of the Electrical Codes of St. Joseph County and the City of South Bend, Indiana.

Electrical Contractor: _____
(Please list Company Name, how registered within our jurisdiction)

Phone Number: _____

Email Address: _____