



Solar Energy System Permit Application

450 West Main Street - PO Box 90
New Castle, CO 81647
Phone: (970) 984-2311
Email: psmith@newcastlecolorado.org

Permit#: _____
Zone District: _____
Occupancy: _____

Residential Commercial

Project Address: _____

Subdivision: _____ Block: _____ Lot: _____

Owner: _____

Phone#: _____ Email Address: _____

Mailing address: _____

General Contractor: _____ License#: _____ Phone#: _____

Email: _____

Estimated Valuation: _____

HOA Approval required? Y N

Description of work: _____

*****READ BEFORE SIGNING*****

The building official is authorized to prevent occupancy or use of a structure where violation of any town code is unresolved. A permit expires if proposed work does not begin within 180 days or is suspended for 180 consecutive days. An extension for up to 180 days may be granted at the building official's discretion. A permit becomes null and void after 18 months from the date of issuance. If more time is needed to complete project you must file for an extension at least 30 days prior to expiration of this permit. REMINDER – You must call for utility locates at 1-800-922-1987 at least 3 business days prior to digging to prevent possible fines.

I hereby certify that I have read and examined this application and attest to their truth and accuracy:

Signature of Contractor Date

Signature of Owner Date

Permit Checklist:

- _____ Signed application with paid permit fees
- _____ Town of New Castle business license
- _____ Solar panel installation plan: modules/hardware/layout
- _____ Weight bearing capacity of trusses _____
- _____ Existing roof load _____
- _____ Age of the structure _____
- _____ Wind rating of racks and panels _____
- _____ Description of mounting method _____
- _____ Permits for all solar devices are subject to fee limits set forth in Colorado HB 11-1199

***** For office use only*****

Contractor List:	Specialty	License Verification	Phone #
			Email

Valuation: _____
 Permit Fee: _____
 Review Fee: _____
 Use Tax: _____

Deposit: _____
 Date Paid: _____
 Receipt #: _____

Total: _____

Approved By: _____