

**RESIDENTIAL AND NON-RESIDENTIAL
CHECKLIST FOR PERMITTING ELECTRIC
VEHICLE CHARGING STATIONS**

The purpose of Chapter 15.14 of the Municipal Code is to promote and encourage the use of electric vehicles by creating an expedited, streamlined permitting process for electric vehicle charging stations while promoting public health and safety and preventing specific adverse impacts in the installation and use of such charging stations.

Please complete the following information related to permitting and installation of Electric Vehicle Service Equipment (EVSE) and submit with a building permit application.

This checklist contains the technical aspects of EVSE installations and is intended to help expedite permitting and use for electric vehicle charging.

Upon this checklist being deemed complete, a permit shall be issued to the applicant. However, if it is determined that the installation might have a specific adverse impact on public health or safety, additional verification will be required before a permit can be issued.

This checklist substantially follows the “Plug-In Electric Vehicle Infrastructure Permitting Checklist” contained in the Governor’s Office of Planning and Research “Zero Emission Vehicles in California: Community Readiness Guidebook” and is purposed to augment the guidebook’s checklist.

Project Information:

Address: _____

APN: _____ Tract: _____ Lot: _____ Block: _____

- | | | |
|---|---|--|
| ☐ Single-Family | ☐ Multi-Family (Apartment) | ☐ Multi-Family (Condominium) |
| ☐ Commercial (Single Business) | ☐ Public Right-of-Way | ☐ Commercial (Multi-Businesses) |

Location and Number of EVSE to be Installed:

Garage: Parking Level(s): _____ Parking Lot: _____ Street Curb: _____

Valuation: _____

Scope of Work: _____

Property Owner Information:

Name: _____

Address: _____

Phone: _____ Email: _____

Contractor Information:

Company Name: _____

Representative Name: _____

Contractor’s License Number: _____ Exp. Date: _____ Class: _____

Address: _____

Phone No.: _____

Workman’s Comp. No.: _____ Exp. Date: _____ Company: _____

City Business License No.: _____ Exp. Date: _____

EVSE Information:

EVSE Charging Level: ☐ Level 1 (120V) ☐ Level 2 (240V) ☐ Level 3 (480V)
Maximum Rating (Nameplate) of EV Service Equipment: _____
Voltage EVSE: _____ V Manufacturer / Model # of EVSE: _____
Mounting of EVSE: ☐ Wall Mount ☐ Pole Pedestal Mount ☐ Other

System Voltage Information:

☐ 120/240V, 1 ϕ , 3W ☐ 120/208V, 3 ϕ , 4W ☐ 120/240V, 3 ϕ , 4W
Rating of Existing Main Electrical Service Equipment: _____ Amperes
Rating of Panel Supplying EVSE (if not directly from Main Service): _____ Amperes
Rating for Circuit for EVSE: _____ Amps / _____ Poles
A/C Rating of EVSE Circuit Breaker (if not Single Family, 400A): _____ A.I.C. (or verify with Inspector in the field)
Specify Either Connected, Calculated, or Documented Demand Load of Existing Panel:

- Connected Load of Existing Panel Supplying EVSE: _____ Amps
- Calculated Load of Existing Panel Supplying EVSE: _____ Amps
- Demand Load of Existing Panel or Service Supplying EVSE: _____ Amps

Total Load (Existing Plus EVSE Load): _____ Amps

For Single Family Dwellings, if Existing Load is not known by any of the above methods, then the Calculated Load may be estimated using the "Single-Family Residential Permitting Application Example" in the Governor's Office of Planning and Research "Zero Emission Vehicles in California: Community Readiness Guidebook." (<https://www.opr.ca.gov>)

EVSE Rating _____ Amps X 1.25 _____ Amps = Minimum Ampacity of EVSE Conductor = # _____ AWG

For Single-Family: Size of Existing Service Conductors = # _____ AWG or kcmil OR Size of Existing Feeder Conductor Supplying EVSE Panel = # _____ AWG or kcmil (or verify with Inspector in field)

Please provide a link to the manufacturer's installation instructions to be coordinated with the EVSE Manufacturer / Model number as specified in the EVSE Information above: _____

I hereby acknowledge that the information presented is true and correct representation of existing conditions at the job site and that any causes for concern as to life-safety verifications may require further substantiation of information.

Applicant's Signature: _____ **Date:** _____

Regulations:

[FINAL LANGUAGE OF APPROVED ORDINANCE TO BE INSERTED]