

NEW DWELLINGS

B# _____

Property Information

*Energy Path #: _____ *Description of Project: _____

 *Property Address _____
 or Tax Lot # Street City State Zip Code

Bedrooms _____ *Dwelling Height _____ *Residence Sq Footage _____ Garage Sq Footage _____ Total Sq Footage _____

 *Water Source: Water District Community Well Shared Well City Cistern

Contact Information

*Owner(s) Name _____ *Phone _____

 *Owner's Mailing Address _____
 # Street City State Zip Code

*Contractor Name _____ *CCB# _____

*Contact Person _____ Contact Phone _____ Contact Fax _____ Contact Cell _____

 *Contact Person Mailing Address _____
 # Street City State Zip Code

Electrical Information

*Contractor: _____ * License #: _____

 *Temporary Power Needed? Now At Issuance *Property for Sale, Rent or Lease? YES NO

*Temp Power Contractor: _____ * License #: _____

*Limited Energy/Low Voltage (mark all that apply if using a different electrical contractor):

	25.1	Audio/Stereo System		25.6	Landscape Irrigation Control
	25.2	Burglar Alarm		25.7	Outdoor Landscape Lighting
	25.3	Garage Door Opener		25.8	Vacuum System
	25.4	Fire/Security Alarm		25.9	Other (specify):
	25.5	Heating/Thermostat/Ventilation/Air Conditioning			

Mechanical Information

*Contractor: _____ * License #: _____

 *Heat Source: Gas Electric Both Oil Solar System Wood Other (specify): _____

	Forced Air over 100,000BTU?		Under 100,000BTU
	Heat Pump over 100,000BTU?		Under 100,000BTU
	Baseboard Electric Wall Heaters?		
	Wood Stove, Pellet, Zero Clearance Fireplaces? →		Enter Qty
	Exhaust Fans? →		Enter Qty
	Radiant Floor Heating Closed w/ Potable Water Conn.		Radiant Floor Heating Open Loop w/ Potable Water Conn.
	Boiler over 200,000BTU		Under 200,000BTU

*If Gas, check all that apply: *Number of gas vents: _____

	Range		Dryer		Furnace
	Water Heater		Free Standing Stove / Insert / Fire logs		Barbeque
	Boiler		Radiant Floor Water Heater		Log Lighter

*If Propane: Contractor's Name: _____ License #: _____

Plumbing Information

*Contractor: _____ * License #: _____

*Distance from water source to dwelling: _____ *Distance from dwelling to septic tank/sewer connection: _____ *# Bathrooms: _____

for office use only	Electrical	Limited	Temp	Mechanical	Plumbing
	# _____	# _____	# _____	# _____	# _____
	_____	use above chart	_____	0_ 1_	_____
	_____		_____	_____	_____
	_____		_____	_____	_____
	_____		_____	_____	_____
	Park & Rec SDC's: _____		Transportation SDC's: _____		