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Property address

Permit #

# Inspection Verification Letter

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**\*\*\* ALL PERMITS MUST BE PULLED PRIOR TO START OF WORK PER 2007  
BUILDING CODE SECTION 105.1\*\*\***

**Please fill out this form with the applicable information prior to your first inspection. All contractors shall be responsible for verifying that all information listed is accurate.**

**Solar equipment:** # of Inverter(s) \_\_\_\_\_ # of Panels \_\_\_\_\_

Inverter Make: \_\_\_\_\_ Inverter Model # \_\_\_\_\_

Panel Make: \_\_\_\_\_ Panel Model: \_\_\_\_\_

**Air Conditioning Equipment:**

Brand: \_\_\_\_\_

Condenser:

Evaporative Coil:

M/N: \_\_\_\_\_

M/N: \_\_\_\_\_

S/N: \_\_\_\_\_

S/N: \_\_\_\_\_

Furnace:

M/N: \_\_\_\_\_

S/N: \_\_\_\_\_

SEER Rating: \_\_\_\_\_

ARI #: \_\_\_\_\_

Inspected by (Building and Safety Inspector):

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(Print Name)

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(Signature & Date)

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**Other Equipment:**

**Water Heater:**

Manufacturer: \_\_\_\_\_ Model #: \_\_\_\_\_

Energy Factor: \_\_\_\_\_

**Windows: (PLEASE INCLUDE WINDOW RATING STICKER)**

# of Windows: \_\_\_\_\_ Brand: \_\_\_\_\_

**Pool Pump:**

Manufacturer: \_\_\_\_\_ Model# \_\_\_\_\_

**Pool Heater:**

Manufacturer: \_\_\_\_\_ Model# \_\_\_\_\_

**Cool Roof:**

Product Manufacturer: \_\_\_\_\_ Rating: \_\_\_\_\_

**Insulation:**

**Awnings/Patio Covers: (NORTH FACING DO NOT QUALIFY FOR EIP)**

Square Footage of qualifying product: \_\_\_\_\_

# of Awnings: \_\_\_\_\_

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