



RESIDENTIAL & NON-RESIDENTIAL CHECKLIST PERMITTING ELECTRIC VEHICLE SERVICE EQUIPMENT (EVSE)

Please complete the following information related to permitting and installation of Electric Vehicle Service Equipment (EVSE) as a supplement to the application for a building permit. This checklist contains the technical aspects of EVSE installations and is intended 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.

Job Address:	Permit #:		
Project Type			
<input type="checkbox"/> Single-Family <input type="checkbox"/> Multi-Family (Apartment) <input type="checkbox"/> Multi-Family (Condominium)	<input type="checkbox"/> Commercial (Single Business) <input type="checkbox"/> Commercial (Multi-Businesses) <input type="checkbox"/> Mixed-Use <input type="checkbox"/> Public Right-of-Way		
Location and Number of EVSE to be Installed:			
Garage: ____	Parking Level(s): ____	Parking Lot: ____	Street Curb: ____
Description of Work:			

Applicant Name:	
Applicant Phone & email:	
Contractor Name:	License # & Type:
Contractor Phone & email:	
Owner Name:	
Owner Phone & email:	



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EVSE Charging Level:		
<input type="checkbox"/> Level 1 (120V) <input type="checkbox"/> Level 2 (240V) <input type="checkbox"/> Level 3 (480V)		
Maximum Rating (Nameplate) of EV Service Equipment = _____ kW		
Voltage EVSE = _____ V	Manufacturer of EVSE: _____	
Mounting of EVSE:		
<input type="checkbox"/> Wall Mount <input type="checkbox"/> Pole Pedestal Mount <input type="checkbox"/> Other _____		

System Voltage:		
<input type="checkbox"/> 120/240V, 1φ, 3W <input type="checkbox"/> 120/208V, 3φ, 4W <input type="checkbox"/> 120/240V, 3φ, 4W <input type="checkbox"/> 277/480V, 3φ, 4W <input type="checkbox"/> Other _____		
Rating of Existing Main Electrical Service Equipment = _____ Amps		
Rating of Panel Supplying EVSE (if not directly from Main Service) = _____ Amps		
Rating of Circuit for EVSE: _____ Amps / _____ Poles		
AIC Rating of EVSE Circuit Breaker (if not Single Family, 400A) = _____ A.I.C. (or verify with Inspector in 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 (Provide <i>Demand Load Reading from Electric Utility</i>)		
Total Load (Existing plus EVSE Load) = _____ Amps		



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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 Type/Size of EVSE Conductor = # _____ AWG Conductor Type: _____

For Single-Family:

Size of Existing Service Conductors: # _____ AWG/kcmil; **or**

Size of Existing Feeder Conductor Supplying EVSE: # _____ AWG/kcmil

Conductor Type: _____

(or Verify with Inspector in field)

I hereby acknowledge that the information presented is a 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.

Signature of Permit Applicant

Date