

CITY OF PALM SPRINGS

ELECTRICAL VEHICLE CHARGING PERMIT APPLICATION / CHECKLIST

Job Address:	Permit No:	
<input type="checkbox"/> Single Family <input type="checkbox"/> Multi – Family <input type="checkbox"/> Commercial <input type="checkbox"/> Public Right of Way		
Location and Number of EVSE to be Installed:		
Garage:	Parking Lots:	Street Curb:
Description of Work:		
Applicant Name:		
Contact Phone #:	Contact Email:	
Contractor	License Number	
ESVL Charging Level: <input type="checkbox"/> Level 1 (120V) <input type="checkbox"/> Level 2 (240V) <input type="checkbox"/> Level 3 (480V)		
Maximum Nameplate Rating of EV Service Equipment =		KW
Voltage of EVSE:		V
Manufacturer and Model of EVSE:		
Mounting of EVSE: <input type="checkbox"/> Wall Mount <input type="checkbox"/> Pole Mount <input type="checkbox"/>		
System Voltage:		
<input type="checkbox"/> 120 / 240V, 1 ϕ , 3W <input type="checkbox"/> 120 / 208, 3 ϕ , 4W <input type="checkbox"/> 277 / 480V, 3 ϕ , 4W <input type="checkbox"/>		
Rating of Existing Main Electrical Equipment: =		Amperes
Rating of Panel Supplying EVSE (if not main) =		Amperes
Rating of Circuit for EVSE:		Amps / Poles
AIC Rating of EVSE Circuit Breaker (if not Single Family) =		A.I.C.

<p>Total Service Loads for this Main or Panel (Attach Load Calculation Sheet) :</p> <p>_____ Watts</p>
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I hereby certify that the information presented on this permit application is true and accurate.

Signature of Applicant: _____ Date: _____