



Project Detail Request Form

For pitched roof and flat roof configurations, and SunBeam and ground mount systems

Project Information

Requesting Company: _____

Contact Name: _____

Job Name: _____

Project Address: _____

Street Address

City

State

Zip Code

Contact Phone #: _____ Contact E-Mail: _____

Date Submitted: _____ Date Required: _____

Service Requested: _____ Number of Drawings: 50+

No of Images: (Please Select) *Please attach at least 1 drawing.
Please include roof framing plan.*

Additional Comments:

System Description

Configuration: _____ rows in (Please Select) by _____ columns

System Size (kW): _____ System Type: (Please Select)

Array Tilt _____ deg. Leading Edge Height: _____ inches

Panel Manufacturer: _____ Panel Model: _____

Panel Width: _____ in. Panel Length: _____ in.

Panel Thickness: 0.00 mm Panel Weight: _____ lbs.

Basic Wind / Snow Loads

3-Sec Wind Speed: (Please Select) mph Design Snow Load: _____ psf

Exposure Category: (Please Select) Risk Category: (Please Select)

E-W Post/mount Spacing Desired: _____ ft. Applicable Building Code: (Please Select)

Please Note: SunModo advises the project owner to consult your local building official for laws and regulations regarding installation of PV systems.