OPPORTUNITY NAME:Number of sites for this opportunity:	
DEALER INFORMATION	
Dealer Name:	Phone:
Street Address:	Mobile:
City:	Fax:
State:	Email:
	Project Contact Person:

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## Instructions:

The Commercial Site Audit Form is the first step for the completion of your SunPower Commercial Solar System. Please complete this Site Audit Form with accurate information for SunPower Technical Support to be able to complete your Site Audit Review promptly.

All Site Audit Forms and additional information should be sent to SunPower Technical Support via email at:

## TechnicalSupport@sunpowercorp.com

**Page 1 (This Page):** Fill out the opportunity name, number of sites per opportunity and the SunPower Dealer name.

**Page 2:** Fill out the site details for the opportunity name listed in Page 1. In cases of opportunities with more than one site, the SunPower Dealers can use more than one page to complete all sites. Each different site must have a different name. For opportunities with only one site, the same opportunity and site name can be used.

In order to properly complete Page 2:

- Refer to the ASCE Building Code or the International Building Code (IBC) for the correct values of Wind Exposure, Wind Speed and Occupancy Type. Copies of these documents can be found in the latest version of the Building Code applicable to your location.
- Fill out your preferred inverter, specifying the inverter type and inverter voltage.
- Provide proposed inverter string configuration.
- Fill out the roof construction, roof type and roof condition sections. Complete the Air Barrier section if Single-Ply Mechanical Attached is specified.

**Page 3:** Complete all sections and attach roof drawings or array layout to the Site Audit Form when submitted to SunPower technical Support. Use the comment section if necessary.

SITE NUMBER:	
Site Name:	Wind Exposure: (Default Exposure C)
Street Address:	Wind Speed: (Example: 90 mph ASCE or IBC)
City:	Occupancy: (Example: Schedule II)
State: Zip Code:	Distance from Shore: (Example: x Miles from a lake)
Expected Installation Date:	Values confirmed by : Dealer Building Dept
PREFERRED EQUIPMENT INFORMATION  No. 21 Thursday Thursday  Language Thursday	DV Mariating Contains
PV Panel Type: Inverter Type:	
Number of Panels: Inverter Voltage: Service Voltage:	· · · · · · · · · · · · · · · · · · ·
PROPOSED INVERTER STRING CONFIGURATION	
Inverter 1: (Number of Strings: Number of Panels per	String:)
Inverter 2: (Number of Strings: Number of Panels per	String:) For additional Inverters use the notes section
ROOF CONSTRUCTION	
Existing Roof: Reroof: New 6	Construction:
Roof Height: ft Approximate Building Dime	ensions: ft x ft
Parapet Height: ft Approximate Dimensions o	f Roof Area Available: ft x ft
Age of Roof yrs Is the slope of the roof less	than 1:12 (about 5°)? No Yes
Slope of the Roof: Degrees Measu	ared Estimated
ROOF TYPE	
Manufacturer, if known:	Installer, if known:
1 Built-Up Roof Capsheet	Gravel Surface Smooth
2 Modified Bitumen Capsheet	Gravel Surface Smooth
3 Single-Ply EPDM (Un-reinforced)	EPDM (Reinforced)
ТРО	Hypalon Other:
Single-Ply Attachment Fully Adhered	Mechanically Attached Ballasted
Note: If Mechanically Attached or Ballasted is selected, please make s	ure to complete the "Air Barrier section below":
Air Barrier Monolithic Deck	Vapor or air barrier Pre-Existing Roof
ROOF CONDITION	
Roof Observations: Blisters SoftAreas	Cracking Fractures Ponding
Drainage: (Check all that apply) Internal Perimeter	Overflow Drains Scuppers Gutters
	Not Sure Expiration Date:
Warranty holder and Contact Info:  Other comments on conditions of the roof:	
Care comments on conditions of the 1001,	

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OTHER COMMENTS
ADDITIONAL INFORMATION
Please confirm that the following items are included:
Roof Drawing and/or Array Layout in AutoCAD Electronic format or PDF.
"South" Direction Noted on drawing
Areas of roof shading noted on drawing
Photos of the Roof, Site and Reversed Elevation (From All Components Directions)
Signature (Site Audit Form Prepared by):
Printed Name:
Date:

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