

TOWN OF WOODSTOCK • BUILDING DEPARTMENT

45 COMEAU DRIVE • WOODSTOCK NY 12498

Tel: 845-679-2113x13•Fax: 845-679-8743• building@woodstockny.org

NYS UNIFIED SOLAR PERMIT APPLICATION

FOR ELIGIBLE SOLAR PHOTOVOLTAIC (PV) INSTALLATIONS

PROJECT ELIGIBILITY FOR UNIFIED PERMITTING PROCESS

By submitting this application, the applicant attests that the proposed project meets the established eligibility criteria for the unified permitting process (subject to verification by the AHJ). The proposed solar PV system installation:

<input type="checkbox"/> Yes	<input type="checkbox"/> No	1. Has a rated DC capacity of 25 kW or less.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	2. Is not subject to review by an Architectural or Historical Review Board. (If review has already been issued answer YES and attach a copy)
<input type="checkbox"/> Yes	<input type="checkbox"/> No	3. Does not need a zoning variance or special use permit. (If variance or permit has already been issued answer YES and attach a copy)
<input type="checkbox"/> Yes	<input type="checkbox"/> No	4. Is mounted on a permitted roof structure, on a legal accessory structure, or ground mounted on the applicant's property. If on a legal accessory structure, a diagram showing existing electrical connection to structure is attached.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	5. The Solar Installation Contractor complies with all licensing and other requirements of the jurisdiction and the State.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	6. If the structure is a sloped roof, solar panels are mounted parallel to the roof surface.

SUBMITTAL INSTRUCTIONS

For projects meeting the eligibility criteria, this application and the following attachments will constitute the Unified Solar Permitting package.

- Building Department Permit application as a cover sheet, which may be obtained in person at the building department office or downloaded at the building department's website: <http://woodstockny.org/content/Departments/View/1>
- Site plan with applicable set-backs.
- Certificates of NYS Workers' Comp and General Liability insurances from the contractor naming the Town of Woodstock as certificate holder.
- This NYS Unified Solar Permit application form, with all fields completed and bearing relevant signatures.
- Permitting fee based on estimated cost of installation, rounded up in dollars to next thousand, \$30 for first \$1000 and \$10 for each additional \$1000, by check or money order made payable to Town of Woodstock.
- Required Construction Documents for the solar PV system type being installed, including required attachments.

Completed permit applications can be submitted via US postal service or in person to the building department at 45 Comeau Drive, Woodstock NY 12498, during business hours Mon-Fri (excluding holidays), 9am-4pm.

APPLICATION REVIEW TIMELINE

Permit determinations will be issued within ten business days of receipt of complete and accurate applications. The municipality will provide feedback within ten business days of receiving incomplete or inaccurate applications.

FOR FURTHER INFORMATION

Questions about this permitting process may be directed to Building Department e-mail; building@woodstockny.org

PROPERTY OWNER

Property Owner's First Name _____ Last Name _____ Title _____

Property Address _____

City _____ State _____ Zip _____

Section _____ Block _____ Lot Number _____

EXISTING USE

Single Family 2-4 Family Commercial Other

PROVIDE THE TOTAL SYSTEM CAPACITY RATING (SUM OF ALL PANELS)

Solar PV System: _____ kW DC

SELECT SYSTEM CONFIGURATION

Make sure your selection matches the Construction Documents included with this application.

<input type="checkbox"/> Supply side connection with microinverters	<input type="checkbox"/> Load side connection with DC optimizers
<input type="checkbox"/> Supply side connection with DC optimizers	<input type="checkbox"/> Load side connection with microinverters
<input type="checkbox"/> Supply side connection with string inverter	<input type="checkbox"/> Load side connection with string inverter

SOLAR INSTALLATION CONTRACTOR

Contractor Business Name _____

Contractor Business Address _____ City _____ State _____ Zip _____

Contractor Contact Name _____ Phone Number _____

Contractor License Number(s) _____ Contractor Email _____

Electrician Business Name _____

Electrician Business Address _____ City _____ State _____ Zip _____

Electrician Contact Name _____ Phone Number _____

Electrician License Number(s) _____ Electrician Email _____

Please sign below to affirm that all answers are correct and that you have met all the conditions and requirements to submit a unified solar permit.

Property Owner's Signature _____ Date _____

Solar Installation Company Representative Signature _____ Date _____