Permit Number: _____

STATEWIDE SOLAR PERMIT APPLICATION

Date of Application: _____ **Municipality:** _____

1. **Property Owner:**

_____

Property Owner Name Phone Email

_____

Property Address (Street Address, Town, Zip Code)

_____ _____ _____

Section Plat Lot Number

2. **Is the project located in a Historic District:** Yes___ or No____

3. **Use**

___ One or Two Family (SBC-2 & SBC-5) ___ Townhouse (SBC-2 & SBC-5) ___ Commercial (SBC-1 & SBC-5) Other _____

4. **Total system size (DC):** _____ **Total system size (AC):** _____

5. **Interconnection Location in reference of existing meter:**

____Utility side _____Customer side

6. **Mounting Structure: Ground, Roof, or Solar Canopy**: _____

7. **Is an energy storage component associated with the PV project?** Yes___or No ____

   a. If yes, please indicate the storage use case (check all that apply):
      Backup Power_____ Grid Services_____
   b. How will the storage unit be charged?
      Solar PV _____ Grid _____ Both_____

8. **Solar PV Installer and Electrician:**

_____

Solar PV Installer Business Name

Permit Number: _____

_____
Solar PV Installer Business Address

_____ _____
Installer Contact Name Installer Phone Number

_____ _____
Installer Contractor Registration Number Installer Email

_____
Electrician Business Name

_____
Electrician Business Address

_____ _____
Electrician Contact Name Electrician Phone Number

_____ _____
Electrician License # Electrician Email

9. **What is the existing roofing material? (Metal, Asphalt, Fiberglass, Wood, Membrane, Other)**

_____

10. **Provide method and type of weatherproofing for roof penetrations (i.e., flashing, caulk).**

_____

11. **Is the mounting structure an engineered product designed to mount solar electric modules?** ____
Yes ____ No
If no, provide details of structural attachment in a letter signed by a Rhode Island Professional Engineer

12. **For manufactured mounting systems, provide the following information about the mounting system:**

a. Mounting System Manufacturer _____
b. Mounting System Make and Model Number _____
c. Total Weight of Solar Electric Modules and Rails _____lbs.
d. Total Number of Attachment Points _____
e. Weight per Attachment Point (c ÷ d) _____lbs.

Permit Number: _____

f. Maximum Spacing Between Attachment Points on a Rail _____ inches
(See product manual for maximum spacing allowed based on maximum design wind speed)

g. Designed Wind Speed (mph): _____

h. Total Surface Area of Solar Electric Modules (square feet) _____ft^2

i. Distributed Weight of Solar Electric Module on Roof (c ÷ g) _____lbs. /ft^2

13. Equipment Information:

Inverter 1:

_____	_____	_____
Quantity	Make	Model

Inverter 2 (if using a multiple inverter manufacturers):

_____	_____	_____
Quantity	Make	Model

Modules:

_____	_____	_____
Quantity	Make	Model

14. The following back up information shall be attached:

- ☐ Stamped structural letter signed by a licensed Rhode Island Professional Engineer
- ☐ Site plan (only for ground mounted units)
- ☐ Layout Drawing
- ☐ One line electrical diagram
- ☐ Specification sheets for equipment including modules, inverter(s), racking, and storage equipment (if relevant)
- ☐ All installations 15kW AC or larger shall submit a 128 form

15. All residential (1 & 2 Family) installations require a professional engineer to evaluate existing structural condition and certify the structure condition and certify the structure can accommodate all code design loads to include, but not limited to, uplift loads and/or provide engineered design criteria to modify the existing structure to accommodate said loads.

Sign below to affirm that all answers are correct and that you have met all the conditions and requirements to participate in this expedited process.

_____	_____
Solar Installer Signature	Date