



Town of Queensbury

742 Bay Road, Queensbury, NY 12804

P: 518-761-8256 www.queensbury.net

SOLAR /BATTERY STORAGE SYSTEM/ EV CHARGER APPLICATION

(RESIDENTIAL AND COMMERCIAL PROJECTS)

Submission Requirements:

1. Completed Solar/Battery Storage System/EV Charger application (legibly printed or typed)
2. Workers Compensation insurance information for **ALL** contractors involved in the project – this is REQUIRED EVEN FOR SOLE PROPRIETORS (CE-200)

THREE (3) LEGIBLE COPIES (either 1 pdf & 2 paper (min. 11" x 17") OR 3 paper (min. 11" x 17") OF THE FOLLOWING:

3. Signed and stamped architect or engineer for **solar** plans, which include:
 - a. Design/snow load
 - b. Letter indicating rafters can handle additional load of solar panels and snow
 - c. Proper setbacks from ridgeline for Fire Department access
 - d. Rapid Shutdown
 - e. Battery Storage Details
4. Detailed drawings and specs for **battery storage systems** and **EV chargers**.
5. Plot plan indicating location of proposed project.
6. **All ground-mounted solar panel systems** must obtain Site Plan Review and approval by the Planning Board (please go to www.queensbury.net → Departments → Planning & Development → Forms **OR** contact Laura Moore, Land Use Planner, at 518-761-8265 for additional information).

ADDITIONAL IMPORTANT INFORMATION:

1. Any **changes to the approved plans prior to or during construction** will require the submittal of amended plans, additional reviews and re-approval.
2. If, for any reason, the building permit application is **withdrawn**, 30% of the fee is retained by the Town of Queensbury. After **1 year from the initial application date**, 100% of the fee is retained.
3. Please contact the Town of Queensbury's Building and Codes' office (518-761-8256 x1) for a final inspection once the installation is complete and the electrical inspection has passed.



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Office Use Only

Permit #: _____

Permit Fee: \$ _____

Invoice #: _____

Flood Zone? Y TYPE: _____; N

Reviewed By: _____

SITE INFORMATION:

Project Location: _____

Tax Map ID #: _____ **Subdivision Name:** _____

☐ Residential: ☐ Commercial ☐ Other: _____

☐ Single Family

☐ Multi-Family

A. Solar Panel Information:

Are the solar panels?

☐ Purchased

☐ Leased

Where are they being mounted?

☐ Roof-mounted

☐ Ground-mounted (see #6 on cover page)

Total System Capacity Rating (sum of all panels): _____

Solar PV System: _____ kW DC

Select System Configuration:

☐ Supply side connection with micro inverters

☐ Supply side connection with DC optimizers

☐ Supply side connection with string inverter

☐ Load side connection with DC optimizers

☐ Load side connection with micro inverters

☐ Load side connection with string inverter

B. Battery Storage System Information:

(Please include **detailed** drawings & specs)

Location: _____

C. EV Charger Information:

(Please include **detailed** drawings & specs)

Location: _____

Estimated cost of construction: \$_____

DECLARATION:

- 1. I acknowledge that no construction shall be commenced **prior to the issuance** of a valid permit and will be completed within a 12 month period. Any **changes to the approved plans prior to/during construction** will require the submittal of amended plans, additional reviews and re-approval.
- 2. If, for any reason, the building permit application is **withdrawn**, 30% of the fee is retained by the Town of Queensbury. After 1 year from the initial application date, 100% of the fee is retained.
- 3. If the work is not completed by the 1 year expiration date the permit **may be renewed**, subject to fees and department approval.
- 4. I certify that the application, plans and supporting materials are a true and a complete statement and/or description of the work proposed, that all work will be performed in accordance with the NYS Building Codes, local building laws and ordinances, and in conformance with local zoning regulations.
- 5. A third-party electrical inspection will be completed at which time the Town of Queensbury’s Building and Codes Enforcement department will be contacted to complete an inspection of the final installation of the solar panels.

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

I have read and agree to the above:

Property Owner’s Signature Date

Company Representative Signature Date

CONTACT INFORMATION: PLEASE PRINT LEGIBLY OR TYPE, PLEASE INCLUDE AN EMAIL

- **Property Owner(s):**

Name(s): _____
Mailing Address, C/S/Z: _____
Cell Phone: _____ Land Line: _____
Email: _____

- **Contractor:**

Workers' Comp or CE-200 documentation must be submitted with this application

Business Name: _____
Contact Name: _____
Mailing Address, C/S/Z: _____
Cell Phone: _____ Land Line: _____
Email: _____

- **Electrical Contractor:**

Workers' Comp or CE-200 documentation must be submitted with this application

Business Name: _____
Contact Name: _____
Mailing Address, C/S/Z: _____
Cell Phone: _____ Land Line: _____
Email: _____

Contact Person for Compliance in regards to this project: _____
Cell Phone: _____ Land Line: _____
Email: _____