

Chambersburg Office: 1013 Wayne Ave. Chambersburg, PA 17201 Phone: 717 496-4996

Bedford Office: 125 S. Richard Street, Suite 102, Bedford, PA 15522 Phone: 814 310-2326

Somerset Office: 510 Georgian Place, Somerset, PA 15501 Phone: 814 444-6112
Adams Office: 1895B York Road, Gettysburg, PA 17325 Phone: 717 321-9046

Email: pmca@pacodealliance.com Website: https://pacodealliance.com/

Requirement checklist to obtain a building permit for a:

# **RESIDENTIAL SOLAR PANEL**

 ► Roof Mounted or Ground Mounted Solar ◀
Completed two-page application (must be legible and signed) [2 COPIES]
Land Use Permit (signed/approved by the Municipality) [2 COPIES]
Site Plan (include all existing structures, proposed structure and their distances to all lot lines) [2 COPIES]
Manufacturers Specifications [2 COPIES]
House Roof Specifications [2 COPIES]  Engineered structural analysis, signed & sealed should be provided.
Copy of Contractors Certificate of Insurance for Workers Compensation <a href="OR"><u>OR</u></a> If doing the work yourself submit Workers Compensation Insurance Coverage Waiver [refer to the attached document].
Driving directions from a known landmark or intersection

- ✓ After submitting all required documents your application will be reviewed.
- ✓ PMCA will contact you to let you know if your application has been approved or denied.
- ✓ When the project is approved you will be notified the Building Permit is ready. Prior to obtaining the building permit all charges (i.e. administrative, inspections fees) must be paid.
- ✓ Be advised additional fees may be applied, throughout the project, for failed or missed inspections.



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#### APPLICATION FOR BUILDING PERMIT / USE CERTIFICATE

Rcvd. Date Stamp Here

Permit Application No	ax Map / Parcel No.:
Site Address:	ax Map / Parcel No.:
Site Address:Ta	ax Map / Parcel No.:
Complete Address / Street / Lot #	
City State	Zip
Municipality: County: L	and Use Permit No
<u>Use:</u> ☐ Residential ☐ Single-Family Dwelling / Duplex ☐ Multi Family ☐ New / ☐	Relocated Manufactured Home
Commercial Other	Floodplain present: Yes No
<u>Improvement Type:</u> ☐ New ☐ Addition ☐ Alteration ☐ Repair/Replacement ☐ Re	elocation Other
2. LAND / PROPERTY OWNER'S INFORMATION (Complete Section	on 5 for Contractor's Info)
First Name At Lock Name Discussion	Call Na
First Name Mi. Last Name Phone No	c Cell No.:
Street Address City State	Zip Email:
3. BUILDING / STRUCTURE OWNER'S INFORMATION [If D	ifferent From Above]
First Name At Lock Name Discussion	Call Na
First Name Mi. Last Name Phone No	c: Cell No.:
Street Address City State	Zip Email:
4. BUILDING PERMIT APPLICATION	
Provide below description of Work: (Also provide details on plot plan: Show all improvements on le	ot & approx. distances to lot lines)
Total Lot Area: Acres/Sq. Ft. ESTIMATED COST OF CONSTRUCTION: \$_	
	N DATE:/

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#### 5. CONTRACTOR INFORMATION

Business Name:		Phone No:			
Contractor Street Address		City		State	Zip
Person in Charge of Work:		•			•
Email:					
Workman's Compensation Insurance: Provided C	n Record	PA Home Improveme			
►► THIS SECTION MUST BE FULLY COM	PI FTFD OR THE APPL	ICATION MAY BE REJI	CTED AS INCOMP	FTF ◀◀	
I certify that I am the owner of record, or that I have been au authorized by the owner of record. I understand and assume start of construction, and agree to conform to all applicable I or his representative shall have the authority to enter the are the Codes governing this project. I further certify that this infe	6. CERTIFICATI thorized by the owner of re e responsibility for the estal ocal, state, and federal law eas in which this work is be	ON ecord to submit this applic blishment of official prope as governing the execution ing performed, at any rea	ation and that the wor rty lines for required s n of this project. I certi sonable hour, to enfor	k described ha etbacks prior to fy that the Cod ce the provision	o the le official ons of
Applicant Signature	Print Name (Ie	egibly):		Date	
Applicant Phone (Land Line and Cell)		Applicant Email			
Business Name (if applicable)	Em	nail			
☐ Business OR ☐ Applicant Complete Mailing Address					
Business Phone Number (Land Line and Cell)					
	7. PROJECT DET	AILS			
Trades: Building Electrical Work Plumbing	Work Mechanical Wo	ork (HVAC)	pression/Fire Alarm S	/stem	
Heat Source (if applicable):	Fuel Type:				
Foundation Type: Crawlspace Foundation			er:		
· – · –					
Details:					
	UBCONTRACTOR INFO		Additional sheet(s	) attached	
Contractor	Address		Phone No	Pa HI	C#
Contractor	Address		Phone No	Pa HI	C#
Contractor	Address		Phone No	Pa HI	C#
Contractor	Address		Phone No	Pa HI	C#

APPLICANT OR AUTHORIZED AGENT IS RESPONSIBLE FOR CONTACTING PMCA OFFICE FOR ALL REQUIRED INSPECTIONS.

►► IF NOT APPLICABLE TO YOUR PROJECT PLEASE PUT N/A ON THE LINE/ SPACE ◄ ◄

# Required Documents for Solar Photovoltaic Systems Permitting

Completed Building Permit Application and two (2) copies of the following documents:

- 1. Location, floor, and site plans. Site plan must show septic system location and all buried utilities.
- 2. Detailed System Diagram of all the system components, highlighting system grounding and bonding.
- 3. Basic Line Drawing that shows all the devices on the system including the solar module, DC disconnect, inverter, sub-panels, AC disconnect, main service meter, and wire sizes and connections. Specify manufacturer, model numbers, and ratings.
- 4. Show specific locations and labels used for compliance with NEC 690 and UL 969.
- 5. PV Module Label and Listing Specs.
- 6. Inverter Label and Listing Specs.
- Rack Label and Listing Specs.
- 8. Rack Mounting Details and Calcs (Ground Mounted Systems).
- 9. Battery Storage Location and Venting (if applicable).

#### **Worksheet Information**

Any proposed supply-side connection will not be approved if it is considered a violation of the UL listing of the equipment. Provide complete information of method of supply-side connection, if proposed.

#### 

# Roof Design 1. Approximate Age of Roof \_\_\_\_\_\_ 2. Roofing Type: Comp Shingle Tile Shake Metal 3. Rafter Size: X \_\_\_\_ Inches 4. Rafter Spacing: 16" o.c. 24" o.c. Other \_\_\_\_ 5. Rafter Span: Array Weight: Ibs. Truss/Rafters that are over-spanned or if the array is over 5 lbs psf, design by a licensed professional may be required.

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# **PV System Components**

#### Per Module Manufacturer & Model

	1.	Photovoltaic Panel	
	2.	Rated Power (PMax)	Watts
	3.	Open Circuit Voltage (Voc)	VDC
	4.	Short Circuit (Isc)	Amps DC
	5.	Maximum Voltage (Vpmax)	VDC
	6.	Maximum Current (Ipmax)	Amps DC
	7.	Inverter Model	
<u>Modu</u>	le Co	onfiguration	
	1.	No. of Modules in Series	
	2.	No. of Strings in Parallel	
	3.	Total Rated Power of System (@STC)	
	4.	DC Grounding Electrode Conductor AWG	
	5.	AC Grounding Electrode Conductor AWG	NEC Sec 690.47 (c) (2)
	6.	Attach PV module, inverter and mounting system cut sh	neets.
<u>Check</u>	(list	for PV System Plan Check	
		Yes  No - Is a basic site diagram provided showing I	ocation of structure and equipment?
		Yes  No - Is the array configuration shown?	
		Yes  No - Is the array wiring identified?	
		Yes No - Is the combiner/junction box identified?	
		Yes No - Is the AC / DC disconnect box identified?	
		Yes No - Is the equipment grounding specified?	
		Yes  No - Is the conduit size from the array to the po	wer source identified?
		Yes  No - Are cut sheets provided for the PV module	es?
		Yes  No - Are cut sheets provided for the mounting h	nardware?
		Yes No - Are cut sheets provided for the Inverter?	
		Yes  No - Is the system user's manual available to p	roperty owner?
		Yes No - Does the roof appear to be in good conditi	on?

Special Signage is required for Solar PV Systems. Permanently affixed labels shall have a red background with white lettering. Printed material shall be resistant to fading per UL 969, and NEC Article 690

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# **DIRECTIONS TO THE SITE LOCATION**

pplicant:	Phone:	
ections.		
	1 4 1 6	
Jse this space if needed to further clarify t	ne site location:	

Please Note: Inspectors cannot inspect what they cannot find, Be certain the directions are clear. Use Road or Street names, distances between turn offs, and the direction of that travel (North South East or West). Landmarks are very helpful.

# ► Workers' Compensation Insurance Coverage Information <

A. The applicant is
A contractor within the meaning of the Pennsylvania Workers' Compensation Law
☐ Yes ☐ No
If the answer is "Yes," complete Sections B and C below as appropriate.
B. Insurance Information
Name of Applicant:
Federal or State Employer Identification No.
Applicant is a qualified self-insurer for workers' compensation.  Certificate attached
Name of Workers' Compensation Insurer:
Workers' Compensation Insurance Policy No  Certificate attached
Policy Expiration Date:
C. Exemption – MUST BE NOTORIZED  Complete Section C if the applicant is a contractor claiming exemption from providing workers' compensation insurance.
The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provisions of Pennsylvania's Workers' Compensation Law for one of the following reasons, as indicated:
Contractor with no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the township.
Homeowner who elects to do all work without contracting or hiring others to assist.
Religious exemption under the Workers' Compensation Law.
Signature of Applicant: Print Name:
Address: Date:
Commonwealth of Pennsylvania, County of
On this, the, 20 before me, (Notary)
the undersigned personally appeared, known to me (or satisfactorily proven)
to be the person whose name subscribed to the within instrument, and acknowledged that he/she executed the same for the purpose herein contained.
In Witness whereof, I hereunto set my hand and official seal.
Notary Public



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# When applying for a Building Permit you need the following:

- Fill out the appropriate application answering all questions applicable to your job. Application must be legible and signed. (2 copies)
  - o If a portion of the application is not applicable to your project put a N/A on the line.
- A copy of the signed Land Use Permit from the Municipality (Borough or Township) (2 copies)
- A Site Plan showing the location of the existing improvements/structures on your property and approx. distances to all property lines, well, septic system, driveway, etc. Also show the location of the proposed construction. (2 copies)
- Drawings showing details of the construction you want to do. (2 copies)
- Copy of Contractors Certificate of Insurance for Workers Compensation OR if doing the work yourself submit Workers Compensation Insurance Coverage Waiver [refer to the attached document].

### After Building Permit Application is submitted:

- After submitting all required documents your application and drawings will be reviewed.
- PMCA will contact you with an approval or denial.
- If approved, your permit will be issued. The inspection & administrative fees are due when you pick up the permit. You will also obtain a copy of your original application and stamped set of plans.

# After Building Permit is issued:

- The Building Permit placard and Municipal Placard are to be visible on site at all times during theconstruction process.
- To schedule an inspection call the office where your permit application was submitted or visit our
  website to schedule online. Be prepared to have your Permit Number, address and type of
  inspection you are requesting.
  - If you request an inspection BEFORE 3 pm, every effort is made to schedule the inspection for the next business day.
- The copy of your application and approved plans are to remain on site when the building inspectors
  come for inspections. Be advised: we <u>cannot</u> inspect if these are not on site and you may incur
  additional costs due to extra trip(s) by the inspector.

# ✓ Checklist for the Site Plan to be provided with the Permit Application

- 1. Site plans are essential and must be clearly legible and reproducible regardless of the reason for requesting the permit.
- 2. Use an 8 1/2" X 11" sheet of paper at minimum.
- 3. After locating all the structures on your property show distances in feet to the lot lines and between the structures.

#### Provide dimensions of the property getting the proposed improvement

- o Drawing of approx. property layout (Can use hand drawing, photocopy of survey, etc.)
- Acreage (Refer to deed or survey drawing)
- o Approx. boundary dimensions (Can be from the deed, field measurement, or a survey drawing)
- o Parcel Number (Not mandatory obtained from deed or property tax notice)

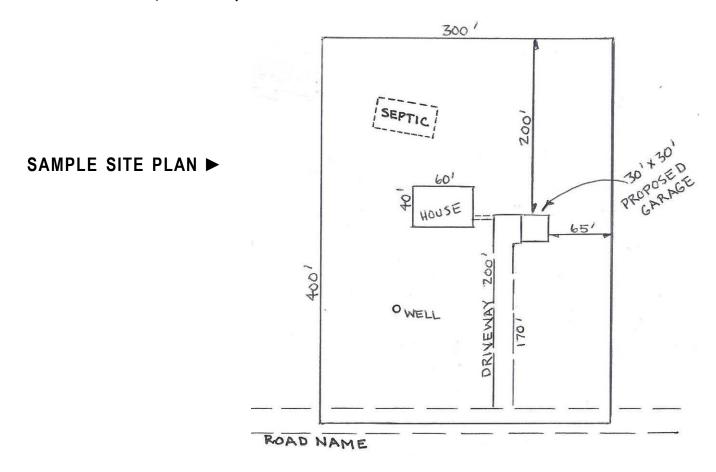
#### Existing Buildings / Structures with Corresponding Dimensions

- Houses
- o Sheds
- o Barns
- o Swimming Pools

- Deck / Patios
- Other buildings or structures on the property
- Location of on lot well and septic IF applicable

#### Proposed Improvement(s)

- o Proposed Structure Dimensions (House, Shed, Barn, Addition, Deck, etc.)
- Location of Proposed Driveway and Sidewalk



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