

Date Registration Received by City:



123 South Third Street  
Easton, PA 18042  
phone (610) 250-6724  
fax (610) 250-6607  
e-mail codes@easton-pa.gov

# CITY OF EASTON

## SOLAR PANEL ZONING/BUILDING PERMIT APPLICATION

Site Address: \_\_\_\_\_

Owner: \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_

Insurance:  W/C  Self-insured  Exemption PA Home Improvement Lic # \_\_\_\_\_

=====  
 Residential  Non Residential

Building Mounted Solar Energy System  Accessory Structure Solar Energy System

**Describe the proposed work:** \_\_\_\_\_

### PERMIT DRAWINGS AND CALCULATIONS

- Structural Calculations – Must be signed and sealed by a Pennsylvania licensed Architect or Structural Engineer
- Solar Panel Cut Sheets – Manufacturer solar panel cut sheets
- Plans – Provide four (4) complete sets of permit drawings that are signed by the Pennsylvania licensed Architect or Structural Engineer. (11x17 or bigger)
- Site Plan – Provide a site plan drawn to scale. The site plan must include a north arrow, site dimensions, street names and state the address of the project. Include the dimensions of all required setbacks of the building from property lines, the construction type and the number of stories. The dimensions of the solar panels setback from the building faces shall also be included. Must supply photographic documentation showing adjoining properties
- Building Elevations – Indicate all necessary dimensions to determine the height of the building, parapets and solar panels.
- Roof Structural Framing Plan – Include structural framing member information, low slope roof, steep slope roof, wind speed and ground snow load.
- Structural Connection – Provide details of solar panel connection to the roof structure.
- Electrical Diagram – Call out the wiring or cable designation, all conduit size and type and all required grounding and bonding methods. Clearly identify all disconnects, motors, meters, panels and other equipment as required.

### ZONING APPROVAL

DATE REC'D:		DATE REVIEWED:	REVIEWED BY:	
FEE REC'D:		APPROVED <input type="checkbox"/>	DENIED <input type="checkbox"/>	REFER TO PLANNING AS SPECIAL EXCEPTION <input type="checkbox"/>
REC'D BY:		COMMENTS:		
PERMIT NO:				
ZONING DISTRICT:				

**ELECTRICAL PERMIT**

Site Address: \_\_\_\_\_

Electrical Contractor: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_

Insurance:  W/C  Self-insured  Exemption  Other \_\_\_\_\_ PA Home Improvement Lic # \_\_\_\_\_

ITEM	NO.	LOCATION, SIZE, BRIEF DESCRIPTION

**Note:**

All new electrical wiring must be inspected by a city-approved electrical inspector. Homeowner/contractor may **NOT** change electrical inspector during the course of the work being performed under this permit.

Electrical work will be inspected by \_\_\_\_\_ (list on reverse)

All work, materials and construction to be in accordance with the appropriate regulations as adopted by the City of Easton.

**FEES**

IMPROVEMENT COST		office use only	
Building	\$	Fee \$	Permit No.
Electrical	\$	Fee \$	Permit No.
<b>Total</b>		<b>Total</b>	<b>Date Issued</b>

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the “approved” construction documents and PA Act 45 (Uniform Construction Code) and any additional approved building code requirements adopted by the Municipality. The property owner and applicant assume the responsibility of locating all property lines, setback lines, easements, rights-of-way, flood areas, etc. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel, or set aside any provisions of the codes or ordinances of the Municipality or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances and regulations. I certify that the code administrator or the code administrator’s authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

\_\_\_\_\_  
Signature of Owner or Authorized Agent

\_\_\_\_\_  
Date

REVIEWED: **APPROVED**  **DENIED**

\_\_\_\_\_  
Building Code Official Date

COMMENTS: \_\_\_\_\_

**REQUIRED INSPECTIONS:**

Construction work must be inspected in accordance with these instructions. This department will carry out such periodic inspections during the progress of work as are necessary to insure that work installed conforms to the approved plans and all applicable codes. The owner or other responsible person in charge of work must notify this department when work is ready for any required inspections specified below. If the work is not completed as scheduled, you must cancel the inspection prior to 9:00 a.m. on the day scheduled. Inspections will be performed within two (2) business days of the time for which they are scheduled. The work must not proceed in a manner that will preclude the inspection(s) until it has been made and approval given.

**To schedule an inspection** please call **610-250-6724** forty-eight (48) hours prior to the requested inspection date and you must supply the following information:

- permit number  type of inspection required  property address and location of work
- contact person  contact phone number

Please note that PA UCC compliance approved plan(s), with any comments, **must be on site** at the time of the inspection. Failure to supply plan(s) will result in a \$50.00 fee being assessed with payment being made prior to scheduling any further inspections. This fee will be assessed for each occurrence.

**Required inspections** for all subcodes as indicated:

\_\_\_\_\_ 1. Rough and Final Inspections

\_\_\_\_\_ 2. Electrical inspection (rough and final – approved sticker required on panel box)