



Building Department

## Building Permit Application

### Solar Energy System (PV) - Residential

- 1.) Submit all together to the Building Department:
  - (1) Completed application with applicable fee
  - (2) Construction plans – (1) paper copy, signed & stamped; (1) PDF copy
    1. Must include electrical diagram including location of all components and connections to the existing grid (if interconnected).
  - (3) Copy of property Deed
  - (4) Ulster County Licensed Electricians' Certificate
  - (5) Grid-tied systems:
    1. Provide written proof from local utility company acknowledging the solar energy system will be interconnected to the utility grid.
- 2.) Work covered by this application **may not** begin until permit application is reviewed, plans are approved, a permit is issued and signed for.
- 3.) **Permit number** must be displayed on site in 6" numbers to be seen from the road (make your own sign). **Your permit # will be needed to request inspections.**
- 4.) Upon completion of work, final paperwork must be submitted and final inspection must be scheduled to obtain certificate of compliance.

#### Contractor insurance requirements:

1. Provide NYS Certificate of Workers' Compensation Insurance (C-105.2 or U-26.3) listing Town of Shawangunk as Certificate Holder. *(ACORD forms are not accepted)*  
**---OR---**
2. Self-insured contractor shall provide Certificate of Attestation of Exemption (CE-200) from NYS Workers' Compensation Board ([www.wcb.ny.gov](http://www.wcb.ny.gov))

**Structure Placement:** See Town of Shawangunk Zoning Code for Setback requirements for your property's zone.

1. Ground mounted solar array:
  - Provide copy of survey (signed and stamped) detailing property borders, location of well & septic (if applicable), driveway, and any proposed or existing structures.
2. Roof mounted solar array:
  - Provide NY Licensed Design Professional written structural analysis.

**Inspections:** It is the permit holders' responsibility to schedule required inspections. Please request a list of required inspections for *YOUR* individual project from the Building Dept.

- email inspection *requests* ***by 3pm for inspection next business day to:*** building@shawangunk.org. Please include permit# in subject line (Inspection request BP# XX-XXX). Please include your preferred date and time slot (AM or PM).
- Inspections are performed between 9am-3pm, Monday through Friday
- Please be sure your project is **ready** for the requested inspection. Scheduled inspections that are not ready will be Failed/Not Ready and be assessed a \$75 fee, unless canceled at least 2 hours prior to inspection time.
- Please note: **Photos will not be accepted for missed inspections**
- Typical (minimum) inspections required for Solar Energy System- Residential projects:
  - Please request a list of required inspection for **your** individual project
- Inspection results
  - If no one is at site at time of inspection, email building@shawangunk.org or call (845) 895-2904 after 3pm for inspection results.
  - Dogs and other animals must be secured
  - Fences must be unlocked for inspection access

### **Documents required to be submitted *prior* to scheduling final inspection**

- Verify that all required inspections performed and approved by the Building Department.
- Final electrical inspection and approval (by certified, town approved inspection agency)
- Inspection document of grid-tied systems by public utility.
- Final paperwork (final cost affidavit, affidavit of Superintendent, etc.)
- Your 911# must be displayed with 4" numbers within view of a public road

Permit #: \_\_\_\_\_ Date: \_\_\_\_\_

Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ Zoning District \_\_\_\_\_

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_ Approved  Revisions Required

Comments: \_\_\_\_\_

**\*\*\* This section to be completed by Building Department \*\*\***

**\*\*\*ALL permits require INSPECTIONS or A VIOLATION will be issued\*\*\***

Applicants' Name: \_\_\_\_\_ Phone #: (     ) \_\_\_\_\_

Applicant Type (Owner, Contractor, Design Professional, Agent): \_\_\_\_\_

Applicants' email address: \_\_\_\_\_

Property owner's name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone #: (     ) \_\_\_\_\_

Owner's email address: \_\_\_\_\_ Alt. Phone # (     ) \_\_\_\_\_

Location of project (# and street address) \_\_\_\_\_

Corner Lot: yes / no      Subdivision: yes / no \_\_\_\_\_

Project description: Solar Energy System (PV): (circle) Roof-Mount      Ground-Mount

Number of panels/System capacity in MW-kWDC: \_\_\_\_\_

Cost of construction: \_\_\_\_\_ Permit Fee: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_ Phone # (     ) \_\_\_\_\_

Contractor's Address \_\_\_\_\_

Contractor's email: \_\_\_\_\_

Insurance carrier: \_\_\_\_\_ Policy # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Ulster Co. licensed electrician \_\_\_\_\_ Lic# \_\_\_\_\_ Exp. Date \_\_\_\_\_

**Town of Shawangunk  
County of Ulster  
Office of the Building Inspector**

**AFFIDAVIT OF OWNER**

Premises \_\_\_\_\_

\_\_\_\_\_, being duly sworn, deposes and says that he/she is the  
*(Name of Property Owner as per recorded deed)*

owner above named.

He/She is the OWNER and is duly authorized to perform or have performed the said work and to make and file this application; that all statements contained in this application are true to the best of his/her knowledge and belief and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith.

Deponent alleges that 1) the provisions of the Worker's Compensation Law does not apply in this case in that he/she will do all required work on the premises and will imply no labor thereat, OR 2) owner alleges that contractor performing work will provide required NYS Worker's Compensation Insurance whereof, deponent requests approval of said plan and application and issuance of a PERMIT to commence work.

Signed \_\_\_\_\_  
(signature of Property Owner)

\_\_\_\_\_  
(date signed)

Sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

(To be filed upon completion of work)  
Final Contractor Affidavit

Permit # \_\_\_\_\_ Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

**Town of Shawangunk**

**County of Ulster**

**Office of the Building Inspector**

**AFFIDAVIT OF SUPERINTENDENT**

I, \_\_\_\_\_, am the person who observed the work for which the Certificate of Occupancy/Compliance is being sought, hereby certify that the building constructed under Town of Shawangunk Building Permit # \_\_\_\_\_ has been constructed as per plans and specifications accepted for the Building Permit, and that all work and materials meet the standards and specifications for which they were designed and that the building is safe for human occupancy/use.

Signed \_\_\_\_\_  
Superintendent (General Contractor)

\_\_\_\_\_  
(date signed)

Sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

(To be filed upon completion of work)  
Final project cost sheet

Permit # \_\_\_\_\_ Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

**Town of Shawangunk**

**County of Ulster**

**Office of the Building Inspector**

**AFFIDAVIT OF FINAL COST OF CONSTRUCTION**

I, \_\_\_\_\_, being duly sworn, depose and say that he/she is the applicant/agent named in the Building Permit dated \_\_\_\_\_, 20\_\_\_\_ relating to construction or other work having been performed in the Town of Shawangunk.

Filed Cost of Construction \_\_\_\_\_

Final Cost of Construction \_\_\_\_\_

Permit Fee Paid \_\_\_\_\_

Additional Fee Due \_\_\_\_\_

Signed \_\_\_\_\_  
(Applicant/agent)

\_\_\_\_\_  
(date signed)

(Costs for the work described in the application for building permit include the cost of all the construction and other work done in connection therewith, exclusive of the cost of land)

Sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public