



**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 \_\_\_ Townhouse \_\_\_ Commercial Other \_\_\_\_\_  
(SBC-2 & SBC-5) (SBC-2 & SBC-5) (SBC-1 & SBC-5)

**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: \_\_\_\_\_

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Solar PV Installer Business Address

\_\_\_\_\_  
Installer Contact Name

\_\_\_\_\_  
Installer Phone Number

\_\_\_\_\_  
Installer Contractor Registration Number

\_\_\_\_\_  
Installer Email

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Electrician Business Name

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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.

- 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<sup>2</sup>
- i. Distributed Weight of Solar Electric Module on Roof (c ÷ g) \_\_\_\_\_ lbs. /ft<sup>2</sup>

**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