

# HAZLE TOWNSHIP RESIDENTIAL SOLAR ENERGY PERMIT APPLICATION

Mailing: PO Box 506, Harleigh, Pa. 18225      Physical: 101 W. 27<sup>th</sup> St., Hazle Township, Pa. 18202

P: 570-455-2039 ext. 2    F: 570-453-2402      [zoning@hazletownship.com](mailto:zoning@hazletownship.com)

Date: \_\_\_/\_\_\_/\_\_\_      Zoning District: \_\_\_\_\_      Permit # SES- \_\_\_\_\_      (Residential App only)

U.S. Veteran? \_\_\_\_\_      Processing Fee \$100.00 + Permit Fees

Property Owner: \_\_\_\_\_

Address: \_\_\_\_\_      P.I.N.: 26- \_\_\_\_\_

City: \_\_\_\_\_      State: \_\_\_\_\_      Zip: \_\_\_\_\_

Phone: \_\_\_\_\_      Fax: \_\_\_\_\_      E-Mail: \_\_\_\_\_

If Different: Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_      State: \_\_\_\_\_      Zip: \_\_\_\_\_

Is this a Minor or Major Solar Energy System? \_\_\_\_\_ (See Zoning Ordinance for definition).

Lot size: \_\_\_\_\_ (Attach Plot Plan)

Free Standing? Height: \_\_\_\_\_      Structure Mounted? \_\_\_\_      Height: \_\_\_\_\_

If structure mounted is the structure Primary or an accessory structure? \_\_\_\_\_

Principal Contractor: \_\_\_\_\_      License # \_\_\_\_\_

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

City: \_\_\_\_\_      State: \_\_\_\_\_      Zip: \_\_\_\_\_

Contractors Phone: \_\_\_\_\_      Fax: \_\_\_\_\_

Contractors E-Mail: \_\_\_\_\_

Sub-Contractor: \_\_\_\_\_      License # \_\_\_\_\_

Sub-Contractor: \_\_\_\_\_      License # \_\_\_\_\_

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Cost of project: \_\_\_\_\_ (Attach signed contract)

Registered Design Professional: \_\_\_\_\_

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

City: \_\_\_\_\_      State: \_\_\_\_\_      Zip: \_\_\_\_\_

Phone: \_\_\_\_\_      Fax: \_\_\_\_\_      E-Mail: \_\_\_\_\_

When will the project begin? \_\_\_\_\_      End: \_\_\_\_\_

Will there be any demolition associated with the project? \_\_\_\_\_

Disposal Location: \_\_\_\_\_

Will there be any water run off? \_\_\_\_\_ if yes explain flow and controls.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is a Storm Water Permit required? \_\_\_\_\_ NPDES? \_\_\_\_\_

Description of building use:

Residential: \_\_\_\_\_ Accessory: \_\_\_\_\_

Historic District? \_\_\_\_\_

If proposed in a Historic District, a certificate of appropriateness may be required by the Municipality.

Is the property in a flood plain? \_\_\_\_\_ FEMA Map # \_\_\_\_\_

The applicant hereby 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 to locate all property lines, set back areas, easements, rights-of-way, flood areas, and any third party approvals for this project. 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 that he/she understands all the applicable codes, ordinances and regulations pertaining to this application. Application shall be made by the owner, or lessee of the property/building/structure or agent of either, or by the registered design profession employed in connection with the proposed work.

I certify that the code administrator or the code administrators 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.

THE UNDERSIGNED APPLICANT UNDERSTANDS THAT FALSE STATEMENTS HEREIN ARE MADE SUBJECT TO THE CRIMINAL PENALTIES OF 18 Pa. C.S.A. §4904 RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES. THIS APPLIES TO FALSE STATEMENTS MADE ANYWHERE ON ANY PAGE OF THIS APPLICATION.

I HAVE READ AND UNDERSTAND ALL OF THE STATEMENTS MADE IN THIS APPLICATION AND HAVE DISCUSSED ANY QUESTIONS WITH THE ISSUING OFFICER.

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

\_\_\_\_\_  
Print Name of Owner or Authorized Agent

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Directions to Site:

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<b>OFFICE USE ONLY</b>
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Date Received \_\_\_ / \_\_\_ / \_\_\_

Accepted: \_\_\_\_\_ Time: \_\_\_\_\_ By: \_\_\_\_\_

Rejected \_\_\_\_\_ Date Returned to Applicant: \_\_\_\_\_

Reason for application rejection:

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Planning approval date: \_\_\_ / \_\_\_ / \_\_\_ Zoning Hearing approval date: \_\_\_ / \_\_\_ / \_\_\_

Building Permit Approved: Date: \_\_\_ / \_\_\_ / \_\_\_ By: \_\_\_\_\_

W/Conditions: \_\_\_\_\_

Code Administrator: \_\_\_\_\_

Date issued: \_\_\_ / \_\_\_ / \_\_\_ Expires: \_\_\_ / \_\_\_ / \_\_\_ Permit #: \_\_\_\_\_

Permits can be paid by check money order or credit/debit cards. For credit/debit payments there is a fee of 2.5% or \$1.50 whichever is greater.