Click BLUE BOLDED text below to jump to required form

Connecticut Standardized Municipal Instructions for Residential Solar Photovoltaic (PV) Permitting Process

Town of Stratford

Building Department, Stratford Town Hall
2725 Main Street, Stratford CT 06615
Department Hours: Mon-Fri 8am-4:30pm
Brian Donovan, Building Official
Bart Archibald, Assistant Building Official
Building Official Hours: Mon-Fri 8:30-10am & 1-2pm
Phone (203) 385-4010 Fax (203) 381-2053
www.townofstratford.com

Accessing Application Materials

All required forms for residential roof mounted solar PV projects are included in this package, online, and hard copies are available in Stratford's Town Hall. Please call the Building Department for assistance or for instructions for how to obtain a permit for ground and pole mounted solar PV systems.

Application Materials Checklist

Below is a checklist of materials needed for roof mounted applications to be considered complete. Please note that applications with missing attachments will be delayed.

- ☐ **SOLAR PV PERMIT APPLICATION** and the following attachments:
  - ☐ Structural evaluation by professional engineer or **structural review worksheet**
  - ☐ One-line electrical diagram
  - ☐ Copy of E-1 license, worker's compensation, and letter of authorization of applicable
- ☐ Application Fee: $50.26 per first $1,000 and $10.26 per $1,000 thereafter

Submitting Municipal Permit Applications

Applications must be signed and include payment to be considered complete. Completed Solar Permit Applications can be submitted in person only to the Building Department.

Process of Approval

The below steps indicate the departments in the order they require approval and the typical processing time. Each Department/Commission must be contacted separately for approval.

Town Department	Typical Processing Time*	Roof Mount
☐ Building Department	1 Day	✓

Typically, applicants receive approved Building Permit at the time of submission.

Inspection Requirements

Once all permits to construct the solar installation have been issued and the system has been installed, one on-site inspection for roof mounted systems is required. Call the Building Department in advance to schedule an inspection. Inspection appointments are typically made in a week of request and given a 2 hour appointment window during inspection hours (7am-8am, 10am-11:30am, 1pm-2pm). Electrician must be present.

Once system has passed inspection the Building Dep't will notify Eversource within 1 business day

*Typical processing times are not guaranteed. Per state statute, municipal building departments have 30 days to approve/deny permits

SOLAR PV ELECTRICAL PERMIT

TOWN OF STRATFORD
2725 Main Street
Stratford, CT 06615

Phone: (203) 385-4010
Fax: (203) 381-2053

Office Hours: 8:30 - 10:00 AM
1:00 - 2:00 PM

Permit # _____

Permit fee_____

State Education fee_____

Total_____

Receipt #_____Check #_____

Job Location_____ Date _____

Owner _____ Address _____

Owner (s) Phone #:_____

Kind of Building __ New Residential __ Rehab Residential __ Addition Residential
__ New Non-residential __ Rehab Non-residential __ Addition-Non-residential

Number of Families _____
Description of work to be done _____

UI # _____

SERVICE

Amps _____ Conductor Size _____ Phase _____ No. of Meters _____ Overhead _____

Underground _____ Copper _____ Alum _____ SEC _____ Plastic Pipe _____ EMC _____

TYPE OF WIRING

_____ Armor clad (BX) ____ Non-metallic ____ EMC ____ Phone ____ TV ____ Alarm ___ Other _____

Phone #: _____

Electrical Contractor _____ Cell #: _____

Address _____

City _____ State ___ Zip Code _____ License # _____ Type _____

Cost of Work _____

_____ Approved: _____
Signature of Electrical Contractor **Signature of Inspector**

Remarks: _____

Note: On request of the issuing authority, the applicant shall furnish plans and design information on all systems to be installed under this permit. All work shall comply with the Connecticut State Building Code.

SEE REVERSE SIDE

One Line Site Drawing Must Show:

1. Location of inverters and major equipment
2. Location of roof obstructions (Vents, Chimneys, etc.)
3. Location of Main Breaker Panel
4. Location of Utility Meter
5. Location of DC disconnect (specifications required if other then isolated disconnect
6. Location of AC disconnect
7. Location of batteries and/or charge controllers (if appropriate)
8. Location of solar metering (if appropriate)

Attachment Details of Roof-Mounted Systems (Line Drawing) Must Show:

1. Manufacturer of racking structure
2. Type of fasteners, e.g. Lag Screws, Seam Clamps
    - If Lag Screws Include:
        1. Type (e.g. Zinc, Stainless steel)
        2. Size of Lag
        3. Depth of Thread Penetration
        4. Type of Sealant

Solar PV Module Specification Sheets

Inverter Specification Sheets

Structural Evaluation

Two Potentially acceptable formats are:

1. Structural Review Worksheet
2. Proof of a Structural Review performed by a Registered Design Professional (e.g. Professional Engineer)

Structural Information

(To be used as a standalone supplemental form or in conjunction with the Structural Evaluation portion of this Worksheet on the following pages, 3-4)

Please fill in the following Roof Description Information

ROOF DESCRIPTION:

Wind Exposure Category (B / C / D):[1] _____

Roofing Type (e.g. asphalt shingle, slate, clay tile, cedar shake, metal seam, single-ply membrane, built-up): _____

_____

Age of roof: _____ Number of Layers: _____

Roof Type (e.g. gable, hipped, flat): _____

Framing Type (e.g. stick-built, trusses): _____

If trusses, list manufacturer, if known: _____

Rafter Material (wood, steel, etc.; if wood, specify rafter species[2]): _____

Rafter Size (e.g. 2x6): _____ Rafter Spacing (e.g. 16"): _____

Maximum unsupported rafter span: _____ Feet _____ Inches

Ceiling joist or rafter tie size and spacing (e.g. 2x6@16"): _____

Ceiling joist or rafter tie orientation (relative to rafters): ☐ parallel ☐ perpendicular

Height of ceiling joist or rafter tie measured vertically above top of rafter support walls (enter "0" if ceiling joists are located at the top of the support walls): _____

Height of roof ridge measured vertically above top of rafter support walls: _____

Ridge type (beam or board): _____

Framing Irregularities in vicinity of proposed panel installation (e.g. modifications, skylights, dormers that interrupt rafter spans): _____

Heavy equipment or unusual loads suspended from rafters in the vicinity of proposed panel installation: _____

_____

Other information/Comments: _____

_____

[1] http://publicecodes.cyberregs.com/icod/irc/2009/icod_irc_2009_3_par010.htm

[2] Obtain species from grade stamps on the rafters. If no grade stamps, assume Spruce-Pine-Fir #2.

Please perform the following Roof Load Calculations

ROOF LOAD CALCULATIONS:

a. Total weight of PV modules, rails, mountings, hardware and wiring	_____	Lbs
b. Total number of attachments (mountings)	_____	Mountings
c. Weight per attachment point (mounting) a÷b	_____	**Lbs/Attachment**
d. Maximum spacing between adjacent attachment (mounting) points	_____	Feet-Inches
e. Total surface area of PV modules (square feet)	_____	Ft^2
f. Distributed weight of PV modules a÷e	_____	**Lbs/ft^2**