

**Solar PV Permit Application**  
**Town of Sugar Hill**  
**PO BOX 574 – Sugar Hill, NH 03586**  
**Town Administrator – Jennifer Gaudette – 603.823.8468**

**1. Solar Installation Location:**

Owner Name: \_\_\_\_\_

Map \_\_\_\_\_ Lot # \_\_\_\_\_

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

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

\_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

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

**2. Installer**

Name: \_\_\_\_\_

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

\_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

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

Licensed Electrician: \_\_\_\_\_ License #: \_\_\_\_\_

**3. System Description:**

A. Is the system to be interconnected to the local utility grid?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Electric Utility – Eversource \_\_\_\_\_ NH Electric Cooperative \_\_\_\_\_

B. AC Rating of system (per manufacturer's specs) \_\_\_\_\_

C. DC Rating of system (per manufacturer's specs) \_\_\_\_\_

D. Provide a simple diagram, with major components labeled and identified.

E. Inverter

Manufacturer: \_\_\_\_\_

Model: \_\_\_\_\_

Rating (kw): \_\_\_\_\_

UL 1741 listed Yes: \_\_\_\_\_ No: \_\_\_\_\_

F. Labeling – Show on attached plan.

G. Cost of the System Installed: \$ \_\_\_\_\_

H. Type of System

Ground Mounted \_\_\_\_ Roof Mounted \_\_\_\_

If Roof Mounted:

Height above existing roof \_\_\_\_

Professional Engineer must certify additional load is within the 2018 Building Code

If Ground Mounted:

Attach site plan showing location and setbacks. A tracking array must meet setbacks in all positions.

I. Storage Batteries

i) Will there be storage batteries: Yes \_\_\_\_ No \_\_\_\_

ii) Quantity of Batteries: \_\_\_\_\_

iii) Location of Storage Batteries: \_\_\_\_\_

iv) Storage Batteries complies with NFPA 855 current version: Yes \_\_\_\_

4. Owner's Certification:

I certify that, to the best of my knowledge, all of the information provided in this application is true. The proposed installation complies with the Sugar Hill Zoning Regulations. I grant the Sugar Hill Fire Chief, Building Inspector and/or Selectmen permission to enter my property for the purpose of inspecting the Solar Photo-Voltaic Installation. I acknowledge that the installation must be inspected by the Sugar Hill Fire Chief prior to the system being utilized.

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

\_\_\_\_\_  
Date

5. Installer's Certification

I agree to comply with the current State of New Hampshire Building Code, New Hampshire Fire Code and the 2020 edition of the National Electric Code. I certify that at all times that work involving solar panels and connections that a NH Licensed Electrician will be present.

\_\_\_\_\_  
Installer

\_\_\_\_\_  
Date

6. Permit Fee

Permit Fee of \$100 to be paid at time of application. Paid Check # \_\_\_\_\_

7. Permit Approval

\_\_\_\_\_  
Town Administrator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Fire Chief

\_\_\_\_\_  
Date