



**Application for Type II
Ground Mounted Solar Photovoltaic System Permit**

Town of Clarence, New York

Date: _____

Received by: _____

Fee: _____

Applicant Name: _____ E-Mail: _____

Site Location: _____

Property Owner: _____ Phone: _____

Application Checklist:

Site Plan, elevations, and property survey submitted. _____

Stamped engineered drawings certified by a licensed professional engineer or architect. _____

Aerial Site Plan submitted to show relevant utility poles and lines, trees and structures. _____

Names of all adjacent land owners are shown on site plan. _____

Location of property lines and permanent easements are shown on site plan. _____

Manufacture information provided for the solar photovoltaic system. _____

Screening / Landscaping Plan. _____

Three (3) copies of all documentation provided. _____

All interconnecting cables shall be installed underground or within the structure they are mounted upon. _____

A maintenance and removal plan has been made in writing to the Town of Clarence. _____

System meets setback requirements of a principal structure/use for the zoning district. _____

System does not exceed the lesser of 16 feet from the ground or allowable accessory structure height. _____

Code of the Town of Clarence, Chapter 184 have been met. _____

Signature of Applicant * I have read and agree with the wind turbine regulations
and agree that after one (1) year of turbine inactivity,
the tower and turbine will be removed from property.

Town Use:

Initial Action:

Approved by: _____ *Subject to Issuance of Building Permit by Building Dept.

Referred to Building Dept.: _____

Final Inspection: _____

Filed with Town Clerk: _____

Signature

Date

Permit # _____