

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

Town of Southington

Building Department, Town of Southington
 196 North Main Street, P.O. Box 610, Southington, CT 06489
 Hours: M-W & F 8:30am-4:30pm, Th 8:30am-7pm
 Building Officials' Hours: M-F 8:30-9:30am & 3:30-4:30pm
 Phone 860.276.6242 Fax 860.276.6295
<http://www.southington.org>

Accessing Application Materials

Applications for Solar PV can be completed and submitted online at <https://www.viewmypermitct.org/> through Southington's portal. All required forms are available in this permit package. In addition, Southington's Electrical Permit Application can be found in person at the Building Department. [Zoning Permit Applications](#) and [Inland Wetland Applications](#) can be found online or as hard copies in the Zoning Department. Assistance is available to guide you through the permitting process.

Application Materials Checklist

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

Roof Mounted:

- SOUTHINGTON ELECTRICAL PERMIT** Requirements:
 - Structural evaluation by professional engineer
 - One-line electrical diagram
 - One-line site plan
 - Solar PV Module specification sheets
 - Inverter specification sheets
 - Copy of E-1's electrical license, insurance, worker's compensation
- Application fee: \$40 compliance fee and \$20.26 for first \$1,000 and \$15.26 per additional (See [fee schedule](#))

Ground and Pole Mounted:

The following is required IN ADDITION to the requirements for Roof Mounted Solar PV. Please call the Building Department for assistance

- ZONING PERMIT APPLICATION** and \$80.00 fee
 - Submit 5 copies of plot plans. If well or septic system is present, submit 8 copies
- If within 200 feet of a wetland, Inlands Wetlands Approval is required. Submit an **INLAND WETLAND APPLICATION** and \$110 fee at least 3 days prior to the Conservation Commission meetings (1st Thurs. of each month at 7pm).

Submitting Municipal Permit Applications

Completed applications are encouraged to be submitted online. Once on Southington's portal, select "Electrical Permit" then "Photovoltaic Solar" as the sub-category to properly begin your application. To apply in person or by mail submit an Electrical Permit Application with the required documents listed above to the Building Department. Completed Zoning Permit Applications and Wetland Applications can be submitted either by mail or in person to the Zoning Department (Mon-Fri 8:30am-4:30pm, Thursdays until 7pm). Applications will not be processed until the Application Fee is received.

Process of Approval

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

<u>Town Department</u>	<u>Typical Processing Time*</u>	<u>Ground/Pole Mounted</u>	<u>Roof Mounted</u>
<input type="checkbox"/> Wetland /Conservation Commission	30 Days	X	
<input type="checkbox"/> Zoning	10-14 days	X	
<input type="checkbox"/> Building	7-10 days	X	X

Note: Applicants are encouraged to coordinate their Wetland Application submission, if applicable, with the Conservation Commission's regular meeting schedule for quicker review (1st Thursday of each month at 7pm)

Typically, the applicant will be notified of permit approval via phone or email within 1 business day.

Inspection Requirements

Once all permits to construct the solar installation have been issued and the system has been installed, it must be inspected. One on-site inspection is required for roof mounted systems and up to two inspections are required for ground and pole mounted systems. Inspections can be scheduled by contacting the Building Department by telephone. Please call the morning of your scheduled inspection for an estimate of your specific appointment time.

Once the system has passed inspection the Building Department will notify Eversource within one business day.

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

ELECTRICAL PERMIT APPLICATION - TOWN OF SOUTHTON

DATE: _____ 20____

Permit No.: _____ Cash _____

C.C.: _____ Check# _____

Job Location Address: _____

Owners Name: _____ Phone #: _____

Address: _____ State: _____ Zip: _____

Contractor: _____ License #: _____

Address: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Business Name: _____ Address: _____

Description of Work: Residential: _____ Commercial: _____ New: _____ Alter: _____ Addition: _____

Wired to: NEC _____ IRC _____ CRS#: _____

Service Amperage: _____ Phase: _____ Voltage: _____ No. of Meters: _____

Size of Feeder: _____ Size of Bonding: _____ Sub Panels: _____ New Tenement: _____

No Receptacles: _____ No. Switches: _____ No. Fixtures: _____ No. of Units: _____

Communications Cabling: _____

Primary Source of Heat: _____ If electric, Required Load Calculation Provided _____ Wattage: _____

The undersigned has been authorized by the owner of record to perform the electrical work outlined above, here by applies for a permit to do electrical work in the Town of Southington. All applicable provisions of the National Electrical Code and the local building ordinances will be complied with whether specified herein or not.

Agent/Contractor Signature: _____ Owner Signature: _____

Approved By: _____ Date Approved: _____

PLANNING AND ZONING DEPARTMENT

MUNICIPAL CENTER, 196 NORTH MAIN STREET, SOUTHTON, CT 06489 (860)276-6248



ZONING PERMIT APPLICATION

*fee includes \$60.00 state fee

FEE:* residential accessory structure/addition \$80.00

new construction/commercial/industrial \$160.00

Applicant name and mailing address (please print)

Owner name and mailing address (please print)

ZP # _____

Telephone _____

Telephone _____

ADDRESS OF PROPERTY: _____ Zone: _____

Utilities: Sewer _____ Septic System _____ Well _____ Town Water _____

PROPOSED ACTIVITY: _____

Does the proposed activity entail construction or land alteration within 50 feet of a wetland/wet area/waterbody? YES _____ NO _____

APPROVAL	DATE	FILE #	APPROVAL	DATE	FILE #	APPROVAL	DATE	FILE #
Special Permit*			Inland Wetland			Special Exception *		
Subdivision			Filling of Floodplain			Home Occupation *		
Site Plan			Variance			Expansion of Non-Conforming Use*		

Submit five (5) sets of plot plans, if well or septic eight (8) copies of plot plan required. *NOTE: Provide one copy of certain approval letters stamped by the Town Clerk and noting the volume and page number of the approval in the land records.

OFFICE USE ONLY:	APPROVED	DENIED
Planner/Inland Wetlands:	_____	_____
Zoning Officer:	_____	_____
Town Engineer:	_____	_____
Health Department:	_____	_____
Approved for Zoning Permit. A copy of this approval shall be presented to the Building Official prior to the issuance of a Building Permit.		
	_____	_____
	Zoning Enforcement Officer	Date
CERTIFICATE OF ZONING COMPLIANCE:		
I hereby certify that all improvements were installed in compliance with the Zoning Permit.		
	Approved:	Denied:
Planner/Inland Wetlands:	_____	_____
Zoning Officer:	_____	_____
Town Engineer:	_____	_____
Water Department:	_____	_____
Health Department:	_____	_____
Approved for Certificate of Zoning Compliance. A copy of this approval shall be presented to the Building Official prior to the issuance of a Certificate of Occupancy.		
	_____	_____
	Zoning Enforcement Officer	Date

I have received a copy of the ordinance requiring the fencing of pools.

Signed: _____

Print: _____

TOWN OF SOUTHTON

Conservation Commission

MUNICIPAL CENTER, 196 NORTH MAIN STREET, SOUTHTON, CT 06489
 PHONE (860) 276-6248 FAX (860) 628-3511



FEE: See fee schedule

IW # _____

APPLICATION TO CONDUCT REGULATED ACTIVITY WITHIN INLAND WETLAND OR WATERCOURSE

(In accordance to Connecticut General Statutes Section 22a-36 to 22a-45 inclusive, authorized by the Council of the Town of Southington
 in accordance with an ordinance adopted March 25, 1974.)

Owner Name: _____ Telephone: (____) _____
Last First

Owner Address: _____
Street # Street Name Town State Zip Code

Applicant Name: _____ Telephone: (____) _____
Last First

Applicant Address: _____
Street # Street Name Town State Zip Code

LOCATION OF PROPOSED ACTIVITY:

Street Address: _____ Total Area of Property: _____ acres

Assessor Map # _____ Parcel # _____ Lot # _____ Assessor ID #: _____

Is activity associated with a proposed subdivision? Y N Subdivision #: _____

Is any portion of this property within 500 feet of a Town Boundary? N Y Town: _____

REQUESTING PERMISSION TO: _____

PROPOSED WETLAND AND BUFFER IMPACTS				Please Circle Units sq. ft acres
	<i>Existing</i>	<i>Filled or Disturbed</i>	<i>Proposed Mitigation</i>	<i>Net Change (Existing-Disturbed+Mitigation)</i>
Wetland Area				
Buffer Area				
TOTAL AREA				

For Official Use Only IW # _____
 Date of official referral to Conservation Commission _____ Fee Received: _____
 Stipulations of Conservation Commission: _____

 Action of Agency: _____ Date of Action: _____

Detailed Activity Information:

a. Material to be deposited and/or excavated (maximum slope of 2 horizontal / 1 vertical):

Area of fill: _____ acres _____ square feet

Volume of fill: _____ acres _____ cubic feet

Physical composition (texture, components) of material to be deposited:

b. Data for existing water body(ies) located on parcel:

1. Size of ponds or lakes: _____ acres _____ square feet

2. Maximum depth and, if possible, volume of water:

Depth: _____ feet Volume: _____ cubic feet

c. Location of discharges (if applicable):

Type: _____

Frequency: _____

Volume: _____ cubic feet

Chemical composition: _____

d. Wetland Soil Identification (**Please include a detailed map of soil locations**):

Soil type: _____ Area on site: _____ acres _____ square feet

Soil type: _____ Area on site: _____ acres _____ square feet

Soil type: _____ Area on site: _____ acres _____ square feet

Signature of Soil Scientist: _____

Date: _____

Measures proposed to protect regulated area from:

a. Erosion and sedimentation: _____

b. Leaching of pollutants: _____

Measures proposed to protect regulated area from: (continued)

c. Direct discharge of pollutants: _____

d. Increased flooding and surface runoff hazards: _____

Surety Bond:

Permit approval granted under these regulations, may require the applicant to submit a surety bond with the Agency in a form satisfactory to the Town Attorney and in an amount recommended by the Town Engineer and approved by the Agency as sufficient to guarantee completion of those items specified by the Agency and in conformity with the provisions of these regulations. Such bond shall not be released by the Agency until written certification from the Town Engineer has been received that all of the requirements of these regulations and the Agency have been fully satisfied.

NOTE: Activities affecting a wetland and/or a watercourse may also require a permit from the Army Corps of Engineers. Before beginning activities, it is recommended that the applicant check with this Agency:

U.S. Army Corps of Engineers
New England District-Regulatory Division
696 Virginia Road
Concord, MA 01742-2751
1-800-343-4798

The applicant understands that this application is to be considered complete only when all information and documents required by the Agency have been submitted.

The applicant understands town officials may require access to said property to review proposed activity prior to, during the activity, and after the activity has concluded.

Applications shall be submitted to the Agency at least fourteen (14) days prior to its regular meeting in order for the application to be included on the agenda.

The official date of receipt of this application shall be the next regularly scheduled Conservation Commission meeting following the date of submission, provided such meeting is no earlier than three (3) business days after the receipt or thirty-five (35) days after submission, whichever is sooner.

Applicant must complete attached State of Connecticut reporting form.

The undersigned warrants the truth of all statements contained herein and in all supporting documents according to the best of their knowledge and belief.

Signature of Applicant/Owner/Agent: _____ Date: _____