

Permit Application

**SOLAR PANEL INSTALLATION  
and INTERCONNECTION**



**Town of Apex Building Inspections and Permitting**  
**Phone (919) 249-3418      Email: ePermit.Notify@ApexNC.org**

Application Date \_\_\_\_\_

Applicant Name \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

**Project Address** \_\_\_\_\_ **Suite** \_\_\_\_\_ **Apex, NC** ZIP \_\_\_\_\_

Subdivision or Project Name \_\_\_\_\_ Lot Number \_\_\_\_\_

Project Contact Person \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Contact preference:  Phone  Fax  Email

Property Owner \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Description of Work \_\_\_\_\_

Total Construction Cost \$ \_\_\_\_\_ Proposed Use:  Residential  Commercial

**Electric Utilities Department Phone: (919) 249-3531**

**\*\*Permission to operate - email: Emily.Woody@ApexNC.org or Joy.Cox@ApexNC.org**

Electric service is provided by:  Duke/Progress Energy (\*\* Attach interconnection agreement \*\*)

Town of Apex Electric Utilities (\*\* Complete information below \*\*)

For Town of Apex Utility Customers Only:

Account Number: \_\_\_\_\_ Existing Meter Number: \_\_\_\_\_

Metering Type:  Net Metering  Bilateral Metering Rate:  Standard  TOU

Estimated Install Date: \_\_\_\_\_ Estimated In-service Date: \_\_\_\_\_

Home Owners Insurance with \$100,000 liability attached.  Yes (Residential only)

**Planning Department Approval (to be completed by a Planner) (Commercial and STC only)**

Phone: 919-249-3426 Email: planninginfo@apexnc.org

Planning Dept. approval date: \_\_\_\_\_ Approval Type:  Construction Dwgs  CZC  Administrative Approval

Site listed on a historic registry?  Yes  No Name of registry \_\_\_\_\_

The site is located in the Small Town Character Overlay District?  Yes  No Zoning Dist \_\_\_\_\_

Planning Department Conditions: \_\_\_\_\_

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pproved by (print name) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**Applicant Statement**

I hereby certify that I have the authority to make the necessary application; that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws and ordinances and regulations or private building restrictions, if any, which may be imposed by deed.

I agree to abide by the Terms and Conditions for Interconnecting an Inverter-Based Photovoltaic Generating Facility no larger than 20 kW for Residential Bilateral Metering, 20 KW for Residential Net Metering, or 100 KW for Non-Residential and understand that after inspection my meter will automatically be changed out/installed within 3 business days. I will not operate in parallel until after I receive an email that states that my meter has been changed out or installed by the Electric Utilities Department.

Approval is for work listed and shown on attached plans. Any changes from approved plans will be brought to the attention of both the Inspections Department and the Electric Utilities Department in a timely manner.

Applicant Name (print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**General Construction (Building)**

Contractor Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
License Number \_\_\_\_\_ Classification:  Residential  Building  Limited  Intermediate  Unlimited  
Email \_\_\_\_\_ Construction Cost \$ \_\_\_\_\_  
Authorized Agent (print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**Electrical**

Contractor Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
License Number \_\_\_\_\_ Classification:  Limited  Intermediate  Unlimited  Owner  Other  
Voltage:  50 or less  600 or less  600 or more  
Email \_\_\_\_\_ Electrical Cost \$ \_\_\_\_\_  
Authorized Agent (print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**Technical Information**

Inverter Manufacturer: \_\_\_\_\_ Model: \_\_\_\_\_  
Nameplate Rating: \_\_\_\_\_ (kW) \_\_\_\_\_ (kVA) \_\_\_\_\_ (AC Volts)  Single Phase  
System Design Capacity: \_\_\_\_\_ (kW) \_\_\_\_\_ (kVA)  Three Phase  
Is equipment UL 1741 Listed?  Yes  No (\*\* attach cut-sheet showing listing \*\*)

List components of the PV Generating Facility equipment package that are currently certified:

Equipment Type	Certifying Entity
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

Is there battery storage:  Yes  No

Distance in feet between the PV A/C disconnect and the customers meter: \_\_\_\_\_ feet

Commercial: Current average load \_\_\_\_\_.