



City of Statesboro, Georgia
Planning & Development Department
Phone (912) 764-0630 Fax (912) 764-0664

Solar Equipment Permit Application

Project Address: _____

Project Name (if applicable): _____

SES Level: Principal Accessory Demo

SES Type: Building-Integrated Rooftop Ground-Mounted

Description of Work: _____

Proposed Location of Work: _____

Contact/Contractor Information

Owner Name: _____

Address: _____

Phone #: _____ **Email:** _____ **Fax #:** _____

Contractor: _____ **State License #:** _____

Address: _____

Phone #: _____ **Email:** _____ **Fax #:** _____

Contact for Permit Related Information: Owner Contractor

Other: _____

Address: _____

Phone #: _____ **Email:** _____ **Fax #:** _____

Signature of Applicant: _____ **Date:** _____

Requirements:

- Original submittal should include two (2) sets of site plans compliant with Article VI: Section 38-151(2) of the City Ordinance.
- Mitigation of Impact Plans for all ground based Solar Energy Systems.
- A decommissioning plan for all Solar Energy Systems.
- Please mail copies of plans to P.O. Box 348, Statesboro GA, 30459..
- Contractor/Installer must provide a copy of the Georgia issued state license.
- Affidavit of Compliance with Federal and State Regulation.
- Please allow seven (7) to ten (10) days for processing of permits.
- Inspection scheduling is required during the completion of work.

This application must be filled out completely before the review process may begin.