

Morgan Street Birch Run Homeowners Association Architectural / Landscaping Modification Request

Solar Panel Installation

Applicant Name: _____

Applicant Address: _____

Attachment A –diagram or photo provided by the contractor installing the system showing the system location.

Installer's Name: _____

Installer's Address: _____

Installer's License Number: _____

Installer's Insurance Provider & Number: _____

Attachment B - Photos of similar, roof mounted systems, installed by the contractor installing the system.

Attachment C – Evidence of insurance coverage

NYSDA (NY-SUN) application complete or to be applied for Yes ☐ No ☐

Comments: _____

Energy Storage System: Yes ☐ No ☐ Location: _____

Variance Request: Yes ☐ No ☐ Specific: _____

Attachment D – Detailed rational for request for variance request

I attest that I have read and shared with the contractor the Associations specification and requirement for roof mounted solar panels prior to securing a proposal. I also attest that the requested to move forward with the installation of roof mounted solar panels will comply with all requirements established by local, state, and /or federal law, code, regulation, rule, and or permits and the HOA specification and requirements, which have been provided, in writing, to the installer.

Applicant Signature

Date

Approvals:

Architectural Review Committee

Date

Association Board

Date