APPLICATION FORM for SOLAR ENERGY SYSTEMS

DATE

NAME

STATE

ADDRESS

VILLAGE-CITY or TOWNSHIP____

_____ZIP CODE_

PROPOSED USE ____ACCESSORY or ____PRINCIPAL

LOCATION OF SOLAR ENERGY SYSTEM_____ TYPE OF SYSTEM___GROUND__POLE MOUNTED or ROOF STRUCTURE

LOCATION of SEWAGE TREATMENT SYSTEM_

SET BACK from PROPERTY LINES____

LOCATION of TREES (50' radius) of PROPOSED SOLAR ENERGY SYSTEM

HOW MANY ACRES DO YOU HAVE?

(Under 5 acres you will need a variance for principal systems only)

ACCESSORY SOLAR ENERGY SYSTEM PERMITTED ONLY BY PERMIT IN THE ZONED AREA OF THE UNINCORPORATED AREA OF BETHLEHEM TOWNSHIP.

A plan must be submitted with this application showing the over-all dimensions of the solar energy system.

Applicants signature

Zoning Inspectors Signature Bethlehem Township

Date

Date