



2-8 Johnes Street Newburgh, NY 12550  
OFFICE: (845) 561-3403  
FAX: (845) 245-6584

October 27, 2022

Village of Irvington  
85 Main St.  
Irvington, NY 10533

**RE: 15 Sycamore Dr. (Bouchard Residence)**

Enclosed, please find the balance & updated Engineering plans for the roof mounted solar application at the above mentioned address. Please feel free to contact me directly should you require anything further.

**Sincerely,**

A handwritten signature in black ink, appearing to read "Courtney Roberts".

Courtney Roberts  
Operations Specialist  
Empire Solar Solutions  
(845) 219-8031  
Courtney@empiresolarny.com

# NOTICE OF APPLICATION AND HEARING

Board of Architectural Review

Clerk's Office

Village of Irvington

Westchester County, New York

CERTIFIED MAIL

Date of Mailing **10/21/22**

## NOTICE:

Pursuant to 9-12 of the code of the Village of Irvington notice to adjacent neighbors (as defined below) is required 10 days prior a meeting where an application for Solar Panels to the Village of Irvington Architectural Board is asking to be heard.

Date of Meeting: **Monday November 28th**  
Time of Meeting: Meeting starts at 8pm  
Location of Meeting: Trustees Meeting Room  
85 Main St. Irvington, NY 10533

Applicant Name	<b>Empire Solar Solutions</b>	Owners Name	<b>Matthew Bouchard</b>
Applicant Mailing Address	<b>2-8 Johnes St. Newburgh, NY 12550</b>	Owner Mailing Address	<b>15 Sycamore Ln. Irvington, NY 10533</b>
Applicant Phone Number	<b>(845) 219-8031</b>	Owners Phone Number	<b>(917) 359-2474</b>
Applicant Email Address	<b>Courtney@empiresolarny.com</b>	Owners Email Address	<b>matthew.bryan.bouchard@gmail.com</b>

## Address of Proposed Solar Panels:

Street Address **15 Sycamore Ln.  
Irvington, NY 10533**

To Adjacent Neighbors of: **15 Sycamore Ln.  
Irvington, NY 10533**

Please take notice that the applicant named above is requesting the Board of Architectural Review of the Village of Irvington to grant a permit for the installation of **Solar Energy Equipment** to the address listed above.

Plans of the proposed work are available in the office of the Irvington Building Department for public inspection during regular business hours 5 days prior to the scheduled meeting.

## 9-12. Solar Energy Equipment.

*For any application for a building permit for solar energy equipment, written notice of the application and the date, time and place of the meeting at which it will be considered must be given to all adjacent property\* owners not less than 10 days prior to the meeting date. Notice shall be by a method of mail or a delivery service company providing proof of mailing or delivery or by personal service of such notice on the property owners, evidenced by their signature as acknowledgment of receipt of such notice on a form supplied or similar to one supplied by the Village Clerk. Proof of service of the notice shall be filed prior to or at the meeting at which the application is considered.  
("Adjacent property" refers to any neighbor that shares a property line with the subject property as well as neighbors across any street from the subject property.)*



7021 2720 0002 5849 9765

# U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Irvington, NY 10533

Certified Mail Fee \$4.00

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.60

Total Postage and Fees \$7.85

Sent To  
Barry Groubert

Street and Apt. No., or PO Box No.

11 Sycamore Ln.

City, State, ZIP+4®  
Irvington, NY 10533

PS Form 3800, April 2015 PSN 7530-02-000-9047

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10/27/2022

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<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.60

Total Postage and Fees \$7.85

Sent To  
Deth & Leah Bacharach

Street and Apt. No., or PO Box No.

30 Sycamore Ln.

City, State, ZIP+4®  
Irvington, NY 10533

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<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.60

Total Postage and Fees \$7.85

Sent To  
Matthew Bauchard

Street and Apt. No., or PO Box No.

15 Sycamore Ln.

City, State, ZIP+4®  
Irvington, NY 10533

PS Form 3800, April 2015 PSN 7530-02-000-9047

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<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.60

Total Postage and Fees \$7.85

Sent To  
Eileen Fanfarillo

Street and Apt. No., or PO Box No.

7 Dogwood Ln.

City, State, ZIP+4®  
Irvington, NY 10533

PS Form 3800, April 2015 PSN 7530-02-000-9047

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10/27/2022

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Irvington, NY 10533

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<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.60

Total Postage and Fees \$4.60

Sent To  
Gaman Tugai

Street and Apt. No., or PO Box No.

17 Sycamore Ln.

City, State, ZIP+4®  
Irvington, NY 10533

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Postmark  
Here

10/27/2022

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Irvington, NY 10533

Certified Mail Fee \$4.00

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<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.60

Total Postage and Fees \$7.85

Sent To  
Andrea Pollak

Street and Apt. No., or PO Box No.

17 Dogwood Ln.

City, State, ZIP+4®  
Irvington, NY 10533

PS Form 3800, April 2015 PSN 7530-02-000-9047

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Postmark  
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10/27/2022



# VILLAGE OF IRVINGTON

## BUILDING DEPARTMENT

85 MAIN STREET

IRVINGTON, NEW YORK 10533

TEL: (914) 591-8335 • FAX: (914) 591-5870



## PHOTOVOLTAIC (PV SOLAR) RESIDENTIAL SYSTEMS PERMIT APPLICATION CHECK LIST

Revised June 7, 2017

It is suggested that all applicants applying for a permit read and understand the manufacture installation instructions prior to applying for a building permit and attached ARB guide lines and Village code for Solar Energy Equipment.

### REQUIREMENTS TO APPLY FOR A PHOTOVOLTAIC (PV SOLAR) SYSTEM PERMIT

- ☒ 1) Apply on line at [www.irvingtonny.gov](http://www.irvingtonny.gov) for a mechanical permit, under building permits and along with your application, submit to the building department the following;
- ☒ 2) Owners phone number and email address entered in the online permit application
- ☒ 3) Evidence of Workers Compensation Insurance (on a C-105 or equivalent)
- ☒ 4) Evidence of Liability Insurance naming the Village of Irvington additional insured
- ☒ 5) A copy of the contractors Westchester County Department of Consumer Protection License
- ☒ 6) Pursuant to 9-12-A. provide evidence of notice to adjacent properties owners not less than 10 days prior to the meeting (see attached code section for more details)
- ☒ 7) Submit permit fee: **(all fees must be paid at time of submission)**
  - ☒ \$85 application fee
  - ☐ \$200 for systems up to 5 kilowatts
  - ☐ \$450 for systems above 5 kilowatts and less than 10 kilowatts
  - ☒ \$700 for systems above 10 kilowatts and less than 20 kilowatts
  - ☐ \$700 plus \$250 per additional 10 kilowatts above 20 for systems above 20 kilowatts
  - ☒ \$75 Certificate of Completion inspection and fee
- ☒ 8) An affidavit from a NYS licensed professional detailing and certifying that the existing structure meets or exceeds the minimum load requirement's as per TABLE R301.2(1) for wind and load before and after installation of the proposed equipment or the proposed upgrades to the existing structure to accomplish the aforesaid.
- ☒ 9) Drawings (signed and sealed by a NYS licensed professional) of the roof plan showing the following criteria;
  - a. ☐ Showing all proposed PV panels on all proposed roof surfaces.
  - b. ☐ Showing all equipment on all elevations including
  - c. ☐ Show / list all roof connectors and flashing details
  - d. ☐ Show compliance with section R902.4 (fire classification in accordance with UL1703 and 3' from any lot line)
  - e. ☐ Show compliance with sections R324.3.1 through R324.7.2.5 and NFPA 70 (installation)
  - f. ☐ Show compliance with section R324.7 (access and pathways) (see attachment)
  - g. ☐ Show compliance with section R324.7.2.1-6. (roof access points) (see attachment)
  - h. ☐ Show compliance with section R324.7.3 (ground access areas) (see attachment)
  - i. ☐ Show compliance with section R324.7.4 (single ridge roofs *when applicable*) (see attachment)
  - j. ☐ Show compliance with section R324.7.5 (hip roofs *when applicable*) (see attachment)
  - k. ☐ Show compliance with section R324.7.6 (roof with valleys *when applicable*) (see attachment)
  - l. ☐ Show compliance with section R324.7.7 (allowance for smoke ventilation operations) (see attachment)
  - m. ☐ Show a Fire Department AC disconnect, located outside by the Utility meter on all systems.
- ☒ 10) Provide a drawing or manufactures cut sheets of array mounting hardware and interconnection diagram and specifications.
- ☒ 11) Provide a drawing or manufactures cut sheets of the unit mount and roof penetration's flashing system.
- ☒ 12) 3 wire diagram showing all proposed equipment as governed by the National Electrical Code (NEC)
- ☒ 13) Provide a diagram showing all proposed labels and labeling locations including; Solar AC Disconnect, Inverter Output, Connection Warning, Duel Power Source Warning, Solar AC Combiner Panel, Solar PV Circuits Only, Solar Production meter. (see attachment)
- ☒ 14) Provide snow guards on panels were snow has the potential of sliding of the panel into a neighbor's property
- ☒ 15) Pictures of dwelling showing photo shopped arrays on the structure.
- ☒ 16) Provide a drawing or photo shop picture of all proposed equipment on all effected elevations (including FD emergency disconnect switch)
- ☒ 17) A Fire Department AC disconnect, located outside by the Utility meter on all systems.

# VILLAGE OF IRVINGTON

## BUILDING DEPARTMENT

85 MAIN STREET

IRVINGTON, NEW YORK 10533

TEL: (914) 591-8335 • FAX: (914) 591-5870



- ☒ 18) Separate Electrical Permit application by a Westchester County Department of Licensing, licensed Electrician with required insurances and the appropriate fee (must be filed by the licensed contractor, see village application for further details).
- ☒ 19) Submit signed check list with submission and appropriate building permit fee.
- ☒ 20) Applicant has provided seven copies of the entire submittal for Architectural Review Board approval.

### Applicant Affidavit:

Applicants Name: Empire Solar Solutions

Applicants Address: 2-8 Johnes St.

Newburgh, NY 12550

Applicants Phone # (845) 219-8031

Applicants Email Courtney@empiresolarny.com

Applicant Name: Courtney Roberts Signature: [Signature] Date: 10/18/2022 By signing this affidavit I attest to have read the attached Solar Energy Equipment Code and the Solar Equipment Guidelines manufactures installation instructions and that all information asked for above has been submitted and that the submitted information is correct.

### General Contractor Affidavit:

Contractors Name: Empire Solar Solutions

Contractors Address: 2-8 Johnes St.

Newburgh, NY 12550

Contractors Phone # (845) 219-8031

Contractors Email Courtney@empiresolarny.com

General Contractor Name: Courtney Roberts Signature: [Signature] Date: 10/18/2022 By signing this affidavit I attest to being the general contractor of record for this application and will be responsible for oversite and direct supervision of same, and will maintain a valid Westchester County Department of Consumer Protection License, a valid for Workers Compensation Policy and a General Liability Policy listing the Village of Irvington as Certificate Holder and additional insured with no conditions until such time I apply for and receive a Certificate of Completion.

### Electrical Contractor Affidavit:

Electrical Contractors Name: Matthew Maroney

Electrical Contractors Address: 2-8 Johnes St.

Newburgh, NY 12550

Electrical Contractors Phone # (845) 596-4353

Electrical Contractors Email mattmaroney3@gmail.com

Electrical Contractor Name: Matthew Maroney Signature: [Signature] Date: 10/18/2022 By signing this affidavit I attest to being the electrical contractor of record for this application and will be responsible for oversite and direct supervision of same, and will maintain a valid Westchester County Electrical License, a valid for Workers Compensation Policy and a General Liability Policy listing the Village of Irvington as Certificate Holder and additional insured with no conditions until such time I apply for and receive a Certificate of Completion.

Note: Applications for all exterior elevation changes including photovoltaic solar systems are required to apply for, make a presentation in front of, and receive approval from the Village of Irvington Architectural Review Board (ARB) prior to issuance of a building permit. The ARB meetings are the second and fourth Mondays of the month, with a deadline for submissions one week prior to the meetings (see village web site for confirmation of meetings). Seven sets of copies of the entire application are required to be submitted at the deadline with appropriate fee at the time of submission.

Note: The following list above is given to assist in the application process. It is not intended to be a replacement for the Building or Zoning Code, County or State Regulations, or Consolidate Edison Requirements. Unique and Special projects may require additional information.

*\*Hours of Construction: Monday-Friday 7AM-7PM; Saturday 9AM-5PM; Sunday and holiday's construction is prohibited*

*\*Only completed applications will be accepted with attached insurance certificates and County license*





**LICENSED PROFESSIONAL AFFIDAVIT for  
RESIDENTIAL SOLAR SYSTEMS**


TO BE SUBMITTED AS PART OF THE PERMIT APPLICATION

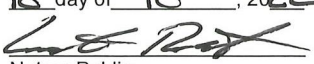
**AFFIDAVIT OF ARCHITECT OR ENGINEER**

State of New York }  
County of Westchester } ss.:

I the undersigned, under penalty of perjury, do hereby affirm:

1. I am an the (architect)(engineer) duly licensed in the State of New York
2. I am the NYS licensed design professional named in the Application for which a Building Permit for a residential solar system located at 15 Sycamore Ln., Irvington, New York 10533.
3. I have inspected the existing building and structure and find that the existing structure with the proposed solar panel installation and connections to the existing roof meet the minimum criteria set forth in;  
Applicable Codes: 2015 Residential Code of New York State  
Design Roof Load: 30 psf live load, 115 psf dead load, 45 psf total load  
Design Wind Load: 120 mph, 35psf  
**OR** have proposed additional measures to insure compliance with above.
4. I have reviewed the following submitted drawings and/or manufacture specifications as part of the submission  
List applicable plans with revision dates: \_\_\_\_\_ (rev date) \_\_\_\_\_  
\_\_\_\_\_ (rev date) \_\_\_\_\_  
\_\_\_\_\_ (rev date) \_\_\_\_\_  
\_\_\_\_\_ (rev date) \_\_\_\_\_  
\_\_\_\_\_ (rev date) \_\_\_\_\_  
\_\_\_\_\_ (rev date) \_\_\_\_\_
5. The plans, drawings and specifications which the Building Permit is requested and listed above, as submitted (a)-were prepared by me or under my supervision, and (b)-to the best of my knowledge comply with the requirements of the Residential Building Code of New York State as adopted by the Village of Irvington, applicable design loads and all other applicable laws, rules and regulations governing building construction.

  
\_\_\_\_\_  
Signature  
Michael Miele  
(Architect) (Engineer)

Sworn to before me this  
18 day of 10, 2022  
  
\_\_\_\_\_  
Notary Public

COURTNEY ELIZABETH ROBERTS  
NOTARY PUBLIC-STATE OF NEW YORK  
No. 01RO6439611  
Qualified in Dutchess County  
My Commission Expires 08-29-2026



# APPLICATION FOR BUILDING PERMIT

The Village of Irvington | 85 Main St | Irvington NY 10533

Application Number:	791	Date:	09/29/2022
Job Location:	15 SYCAMORE LA	Parcel ID:	2.90-45-3
Property Owner:	Bouchard, Matthew	Property Class:	1 FAMILY RES
Occupancy:	One/ Two Family	Zoning:	
Common Name:			

Applicant	Contractor
Erin McConnell	Courtney Roberts
Empire Solar Solutions	Empire Solar Solutions
2-8 Johnes St. Newburgh NY 12550	2-8 Johnes St. Newburgh NY 12550
8452198031	8452198031

## Description of Work

Type of Work:	Solar Panels	Applicant is:	Contractor
Work Requested by:	The Owner	In association with:	
Cost of Work (Est.):	20000.00	Property Class:	1 FAMILY RES

## Description of Work

*New install of 15.70kW solar array on roof. (43) 365W Q-Cell panels w/ Enphase micro inverters.*

**Please Note:** Completing the application does not constitute a permit to commence construction. To obtain your permit follow the instructions on the instruction page provided on page 3.

Job Location: 15 SYCAMORE LA

Parcel Id: 2.90-45-3

### AFFIDAVIT OF APPLICANT

I **Erin McConnell** being duly sworn, depose and says: That s/he does business as: **Empire Solar Solutions** with offices at: **2-8 Johnes St. Newburgh NY 12550** and that s/he is:

- ☐ The owner of the property described herein.
- ☐ The \_\_\_\_\_ of the New York Corporation \_\_\_\_\_ with offices at: \_\_\_\_\_ duly authorized by resolution of the Board of Directors, and that said corporation is duly authorized by the owner to make this application.
- ☐ A general partner of \_\_\_\_\_ with offices \_\_\_\_\_ and that said Partnership is duly authorized by the Owner to make this application.
- ☐ The Lessee of the premises, duly authorized by the owner to make this application.
- ☐ The Architect of Engineer duly authorized by the owner to make this application.
- ☒ The contractor authorized by the owner to make this application.

That the information contained in this application and on the accompanying drawings is true to the best of his knowledge and belief. The undersigned hereby agrees to comply with all the requirements of the New York State Uniform Fire Prevention and Building Code, the Village of Irvington Building Code, Zoning Ordinance and all other laws pertaining to same, in the construction applied for, whether or not shown on plans or specify in this application.

Sworn to before me this 29 day of 9 of 22

  
Notary Public / Commission of Deeds

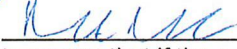
COURTNEY ELIZABETH ROBERTS  
NOTARY PUBLIC-STATE OF NEW YORK  
No. 01RO6439611  
Qualified in Dutchess County  
My Commission Expires 08-29-2026

  
Applicant's Signature

### OWNER'S AUTHORIZATION

I **Bouchard, Matthew** as the owner of the subject premises and have authorized the contractor named above to perform the work under the subject application.

Owner phone number (917) 359-2474 Owner email address matthew.bryan.bouchard@gmail.com

- ☒  I hereby acknowledge that it is my responsibility as the **property owner** to ensure that if the permit (if issued) receives a Final Certificate of Approval from the Building Department and further that if a Final Certificate of Approval is not obtained upon completion of the construction, a property violation may be placed on the property for which this permit is being requested.

Sworn to before me this 29 day of 9 of 22

  
Notary Public / Commission of Deeds

COURTNEY ELIZABETH ROBERTS  
NOTARY PUBLIC-STATE OF NEW YORK  
No. 01RO6439611  
Qualified in Dutchess County  
My Commission Expires 08-29-2026

  
Applicant's Signature



## INSTRUCTIONS

### REQUIREMENTS FOR OBTAINING A PERMIT:

The following items must be submitted in order to obtain a Building Permit:

1. One (1) Building Permit application signed by the owner or a notarized Agent Letter.
2. One (1) property survey (signed and sealed), reflecting existing conditions.
3. Two (2) sets of construction drawings and specifications, including existing and proposed conditions, state design criteria, structural and architectural details, plans, and cross sections, mechanical, electrical, and plumbing drawings (signed and sealed by a likened professional).
4. One USB with all plans (with Licensed Professionals certification/stamp) and specifications in PDF (file size must be less than 25MB).
5. Copy of approved site plan from the Irvington Planning Board when applicable (required on all increases of FAR, footprint, coverage, driveways and increases of cubic content under a roof).
6. Approval by the Architectural Review Board (ARB) when applicable. An additional five (5) sets of construction drawings and specifications (please see ARB requirements (available on the village web site [www.irvingtonny.gov](http://www.irvingtonny.gov)) prior to submission).
7. Visit the Village of Irvington website [www.irvingtonny.gov](http://www.irvingtonny.gov) for additional check list for solar panels, generators, underground propane tanks, signs and awnings(found in forms and documents in the Building & Planning General Information folder).
8. Village Zoning Code is available on the Village website: [www.irvingtonny.gov](http://www.irvingtonny.gov).
9. Provide evidence that the application meets the NYS Energy code as described by [www.dos.state.ny.us/code/energycode/overview.htm](http://www.dos.state.ny.us/code/energycode/overview.htm)

#### Contractor Requirements in order to obtain a Building Permit:

10. Contractor's Certificate of Liability listing the Village of Irvington as the Certificate Holder with no disclaimer in the description other than certificate holder is named additional insured (any additional comments will not be accepted).
11. Contractor's Workers Compensation C-105 form (or equivalent) listing the Village of Irvington as Certificate Holder.
12. Copy of Contractor's Westchester County Home Improvement License.
13. All information above uploaded into permit application with the contractor's contact information, including mailing address, phone number, and email address.
14. Contractor's signature on Affidavit of Contractor (required prior to issuance of the permit).

#### Please Note:

-State Law requires that the contractor submits a copy of Workman's Compensation as required by the New York State Disability Insurance naming the Department of Buildings, Village of Irvington as certificate holder and showing coverage for general contracting and the locations covered by such insurance. If structure is to be demolished a copy of Liability Insurance must also be submitted.

- Please be advised under State and Municipal Laws, the Workman's Compensation and Disability benefits insurance must be submitted on separate state approved forms. The "Acord Form" is no longer acceptable as proof of Workman's Compensation coverage. Further information or questions may be answered by calling the NYS Bureau of Compliance at (518) 486-6307 or by visiting their website or by contacting your insurance provider.

#### FEES ASSOCIATED WITH BUILDING PERMIT APPLICATION(All fees must be paid at time of application):

##### Fee schedule

##### Building Permit (Non-Refundable)

\* Application fee \$85

\* Permit fee \$17 per thousand dollars (\$1000) of estimated cost of construction, or fraction thereof

85  
340

##### • Inspection Fees (as applicable)

- |  |  |
|--|--|
| • Insulation: \$50                               | • Footing: \$50  |
| • Solid Fuel: \$50                               | • Preparation for concrete slabs and walls: \$50             |
| • Foundation and footing drain: \$50             | • Framing: \$50  |
| • Energy Code Compliance: \$50                   | • Building systems, including underground and rough-in: \$50 |
| • Sediment and erosion control: \$50             | • Fire resistant construction and penetrations: \$50         |
| • Footing: \$50                                  | • Final Inspection for C.O.: \$50                            |
| • Preparation for concrete slabs and walls: \$50 | • State and local laws (per re-inspection): \$50             |

Total Inspections \_\_\_\_\_

\* Certificate of Occupancy Fees: One dollar (\$1.00) per thousand dollars of estimated cost. Minimum Fee \$25.00

\* Permit Revisions or Amendment: \$50.00 (plus \$17 per thousand (\$1000), of the estimated cost of construction and any additional inspections fees).

\* Re-inspection fee for work not ready at time of inspection or not in compliance: \$50

\* Applications for Undocumented Work/ Legalizing: Applications to legalize work done prior to applying for and receiving a building permit shall pay double all applicable fees and inspections, including the cost of construction based on the cost of all proposed work being legalized at the time of application. Minimum fee \$500.00.

(To be collected at time of submission of application)Total \_\_\_\_\_

(Note: pursuant to 224-54A all permits are valid for one (1) year from date on permit  
Any permit that expires will be subject to additional fees.)

# APPLICATION FOR ELECTRICAL PERMIT

The Village of Irvington | 85 Main St | Irvington NY 10533

This application is hereby made by the undersigned a licensed electrician, representing the owner, to do electrical work subject to all rules and regulation of New York State, the New York Board of Fire Underwriters and the Board of Trustees of the Village of Irvington.

Application No.: 793

Date: 09/29/2022

Job Location: 15 SYCAMORE LA

Parcel ID: 2.90-45-3

Common Name:

Property Class: 1 FAMILY RES

Occupancy:

Zoning:

Applicant	Property owner
Matthew Maroney	Bouchard, Matthew
2-8 Johnes St. Newburgh NY 12550	15 SYCAMORE LN IRVINGTON NY 10533
courtney@empiresolarny.com	courtney@empiresolarny.com
8452198031	
License No. 1826 Expires:	

**Description of Work:** New electric terminations of 15.70kW solar array on roof. (43) 365W Q-Cell panels w/ Enphase micro inverters.

	Outlets		Fixtures		Motors		Heaters	
Location	Sidewall	Switch	INCADE	FLUORE	No.	H.P.Each	No.	Watts
Outside								
Basment								
1st Floor								
2nd Floor								
3rd Floor								
Other								

Associated Building Permit Number:

Electrical Inspection Agency: State Wide Inspections

Matthew Maroney being duly sworn, deposes and says: That (s) he is a duly authorized agent of the owner of the premises mentioned in this application, including the accompanying plans, drawings, and statements (if any) are true, and that this application is true and complete statement, an accordance with the laws and regulations of all proposed work to be done on this property. I further swear that I will abide by all the rules and regulations of all proposed work to be done on this property. I further swear that I will abide by all rules and regulations of the Building Inspector whether specifically stated herein or on the plans or not. I will hold the Village of Irvington and their officials harmless from any liability of any injury or damage to persons or property for the issuance of any license or permits.

A copy of the following information is required with every application:

- A valid Westchester County Electrician's License
- General Liability Insurance (listing the Village of Irvington as Additional Insured)
- Workers Compensation Policy
- Fee of \$85



Signature of Licensed Electrician 



EMPISOL-01

JBRUNO

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
9/23/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Levitt-Fuirst Associates, LTD 520 White Plains Road 2nd Floor Tarrytown, NY 10591	<b>CONTACT NAME:</b>	
	<b>PHONE (A/C, No, Ext):</b> (914) 457-4200	<b>FAX (A/C, No):</b> (914) 457-4200
<b>INSURED</b>  Empire Solar Solutions LLC 2-8 Johnes St Newburgh, NY 12550	<b>E-MAIL ADDRESS:</b> info@levittfuirst.com	
	<b>INSURER(S) AFFORDING COVERAGE</b>	
	<b>INSURER A:</b> Southwest Marine & General Insurance Company	<b>NAIC #</b> 12294
	<b>INSURER B:</b> Continental Indemnity Company	<b>28258</b>
	<b>INSURER C:</b> ShelterPoint	<b>81434</b>
	<b>INSURER D:</b>	
<b>INSURER E:</b>		
<b>INSURER F:</b>		

## COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			GL202200013231	8/26/2022	8/26/2023	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000				
			MED EXP (Any one person) \$ 5,000				
			PERSONAL & ADV INJURY \$ 1,000,000				
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 2,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$ 2,000,000
	OTHER:						\$
	<b>AUTOMOBILE LIABILITY</b>						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR						EACH OCCURRENCE \$
	<b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$
	<b>DED</b> <input type="checkbox"/> <b>RETENTION \$</b> <input type="checkbox"/>						\$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>			37-888493-01-02	1/5/2022	1/5/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input type="checkbox"/> N	N/A				E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
C	<b>NYS Disability</b>			D487830	5/24/2019	5/24/2023	LIMIT - STATUTORY

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Village of Irvington- is included as Additional Insured for covered operations of the named insured

## CERTIFICATE HOLDER

## CANCELLATION

Village of Irvington  
85 MAIN STREET  
Irvington, NY 10533

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



Workers'  
Compensation  
Board

## CERTIFICATE OF INSURANCE COVERAGE

### NYS DISABILITY AND PAID FAMILY LEAVE BENEFITS LAW

#### PART 1. To be completed by NYS disability and Paid Family Leave benefits carrier or licensed insurance agent of that carrier

1a. Legal Name & Address of Insured (use street address only)

EMPIRE SOLAR SOLUTIONS LLC

2-8 JHONES STREET  
NEWBURGH, NY 12550

Work Location of Insured (Only required if coverage is specifically limited to certain locations in New York State, i.e., Wrap-Up Policy)

1b. Business Telephone Number of Insured

845-561-3403

1c. Federal Employer Identification Number of Insured  
or Social Security Number

474896823

2. Name and Address of Entity Requesting Proof of Coverage  
(Entity Being Listed as the Certificate Holder)

VILLAGE OF IRVINGTON  
85 MAIN STREET  
IRVINGTON, NY 10533

3a. Name of Insurance Carrier

ShelterPoint Life Insurance Company

3b. Policy Number of Entity Listed in Box "1a"

DBL487830

3c. Policy effective period

05/24/2022

to

05/23/2023

4. Policy provides the following benefits:

- ☒ A. Both disability and paid family leave benefits.  
☐ B. Disability benefits only.  
☐ C. Paid family leave benefits only.

5. Policy covers:

- ☒ A. All of the employer's employees eligible under the NYS Disability and Paid Family Leave Benefits Law.  
☐ B. Only the following class or classes of employer's employees:

Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insurance carrier referenced above and that the named insured has NYS Disability and/or Paid Family Leave Benefits insurance coverage as described above.

Date Signed 9/23/2022 By \_\_\_\_\_

(Signature of insurance carrier's authorized representative or NYS Licensed Insurance Agent of that insurance carrier)

Telephone Number 516-829-8100

Name and Title Richard White, Chief Executive Officer

IMPORTANT: If Boxes 4A and 5A are checked, and this form is signed by the insurance carrier's authorized representative or NYS Licensed Insurance Agent of that carrier, this certificate is COMPLETE. Mail it directly to the certificate holder.

If Box 4B, 4C or 5B is checked, this certificate is NOT COMPLETE for purposes of Section 220, Subd. 8 of the NYS Disability and Paid Family Leave Benefits Law. It must be emailed to PAU@wcb.ny.gov or it can be mailed for completion to the Workers' Compensation Board, Plans Acceptance Unit, PO Box 5200, Binghamton, NY 13902-5200.

#### PART 2. To be completed by the NYS Workers' Compensation Board (Only if Box 4B, 4C or 5B have been checked)

### State of New York Workers' Compensation Board

According to information maintained by the NYS Workers' Compensation Board, the above-named employer has complied with the NYS Disability and Paid Family Leave Benefits Law (Article 9 of the Workers' Compensation Law) with respect to all of their employees.

Date Signed \_\_\_\_\_ By \_\_\_\_\_

(Signature of Authorized NYS Workers' Compensation Board Employee)

Telephone Number \_\_\_\_\_ Name and Title \_\_\_\_\_

**Please Note:** Only insurance carriers licensed to write NYS disability and paid family leave benefits insurance policies and NYS licensed insurance agents of those insurance carriers are authorized to issue Form DB-120.1. Insurance brokers are NOT authorized to issue this form.

DB-120.1 (12-21)







**Workers'  
Compensation  
Board**

**CERTIFICATE OF  
NYS WORKERS' COMPENSATION INSURANCE COVERAGE**

<p>1a. Legal Name &amp; Address of Insured (use street address only)</p> <p>Empire Solar Solutions, LLC 2-8 Johnes St Newburgh, NY 12550-6028</p> <p>Work Location of Insured (<i>Only required if coverage is specifically limited to certain locations in New York State, i.e. a Wrap-Up Policy</i>)</p>	<p>1b. Business Telephone Number of Insured (845)561-3403</p> <p>1c. NYS Unemployment Insurance Employer Registration Number of Insured</p> <p>1d. Federal Employer Identification Number of Insured or Social Security Number 474896823</p>
<p>2. Name and Address of Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder)</p> <p>Village of Irvington 85 Main Street Irvington, NY 10533</p>	<p>3a. Name of Insurance Carrier Continental Indemnity Co.</p> <p>3b. Policy Number of Entity Listed in Box "1a" 37-888493-01-02</p> <p>3c. Policy effective period 01/05/22 to 01/05/23</p> <p>3d. The Proprietor, Partners or Executive Officers are  <input checked="" type="checkbox"/> included. (Only check box if all partners/officers included)  <input type="checkbox"/> all excluded or certain partners/officers excluded.         </p>

This certifies that the insurance carrier indicated above in box "3" insures the business referenced above in box "1a" for workers' compensation under the New York State Workers' Compensation Law. **(To use this form, New York (NY) must be listed under Item 3A on the INFORMATION PAGE of the workers' compensation insurance policy).** The Insurance Carrier or its licensed agent will send this Certificate of Insurance to the entity listed above as the certificate holder in box "2".

The insurance carrier must notify the above certificate holder and the Workers' Compensation Board within 10 days IF a policy is canceled due to nonpayment of premiums or within 30 days IF there are reasons other than nonpayment of premiums that cancel the policy or eliminate the insured from the coverage indicated on this Certificate. (These notices may be sent by regular mail.) **Otherwise, this Certificate is valid for one year after this form is approved by the insurance carrier or its licensed agent, or until the policy expiration date listed in box "3c", whichever is earlier.**

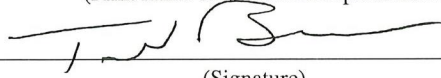
This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy listed, nor does it confer any rights or responsibilities beyond those contained in the referenced policy.

This certificate may be used as evidence of a Workers' Compensation contract of insurance only while the underlying policy is in effect.

**Please Note: Upon cancellation of the workers' compensation policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of Workers' Compensation Coverage or other authorized proof that the business is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law.**

**Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insurance carrier referenced above and that the named insured has the coverage as depicted on this form**

Approved by: Todd Brown  
(Print name of authorized representative or licensed agent of insurance carrier)

Approved by:  09/23/2022  
(Signature) (Date)

Title: Authorized Representative

Telephone Number of authorized representative or licensed agent of insurance carrier: (877) 234-4424

**Please Note: Only insurance carriers and their licensed agents are authorized to issue Form C-105.2. Insurance brokers are NOT authorized to issue it.**



**Matthew Bouchard Residence**  
**15 Sycamore Ln. Irvington, NY 10533**



**FRONT OF HOUSE**



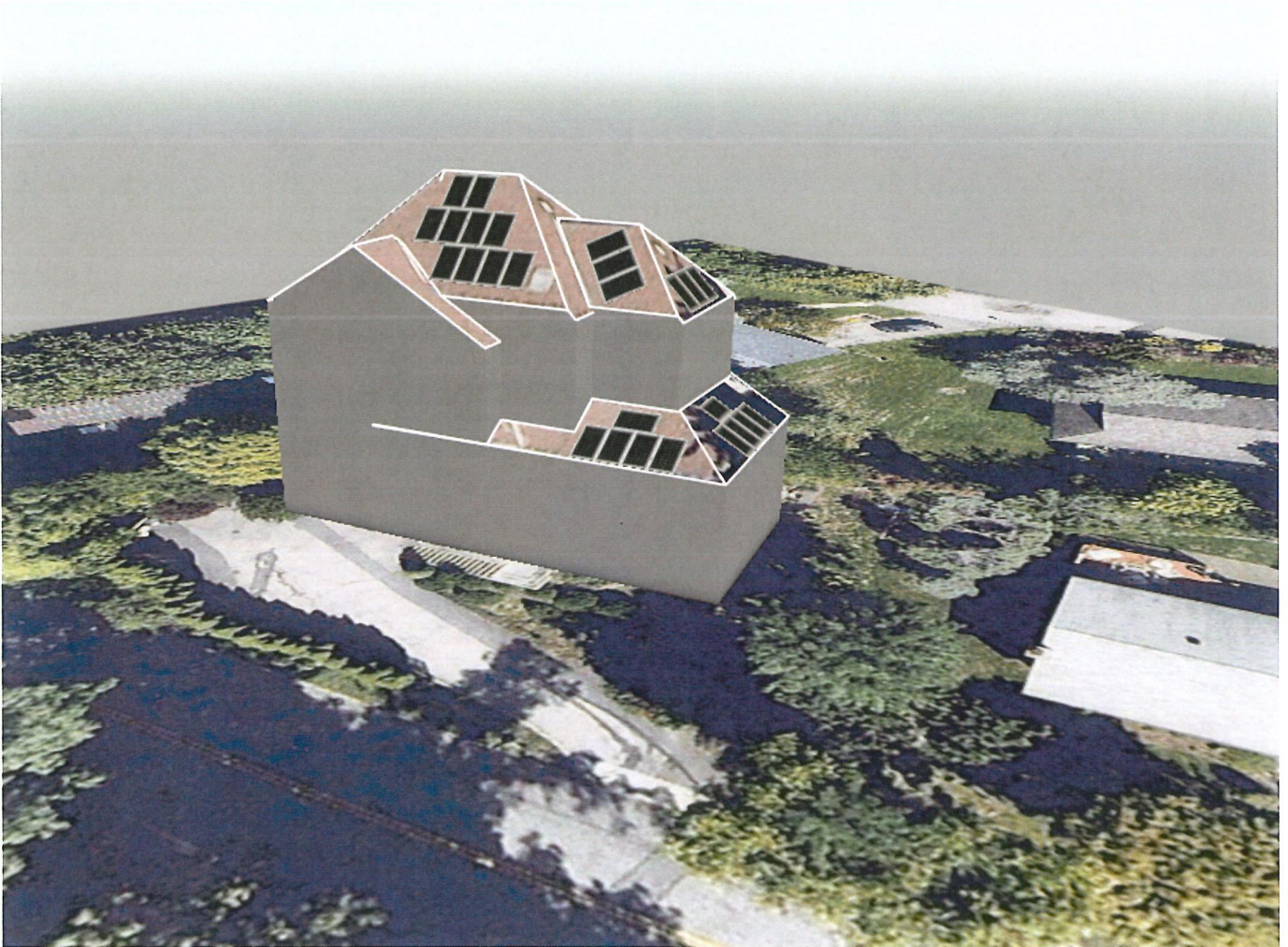
**Matthew Bouchard Residence**  
**15 Sycamore Ln. Irvington, NY 10533**



**BACK OF HOUSE**



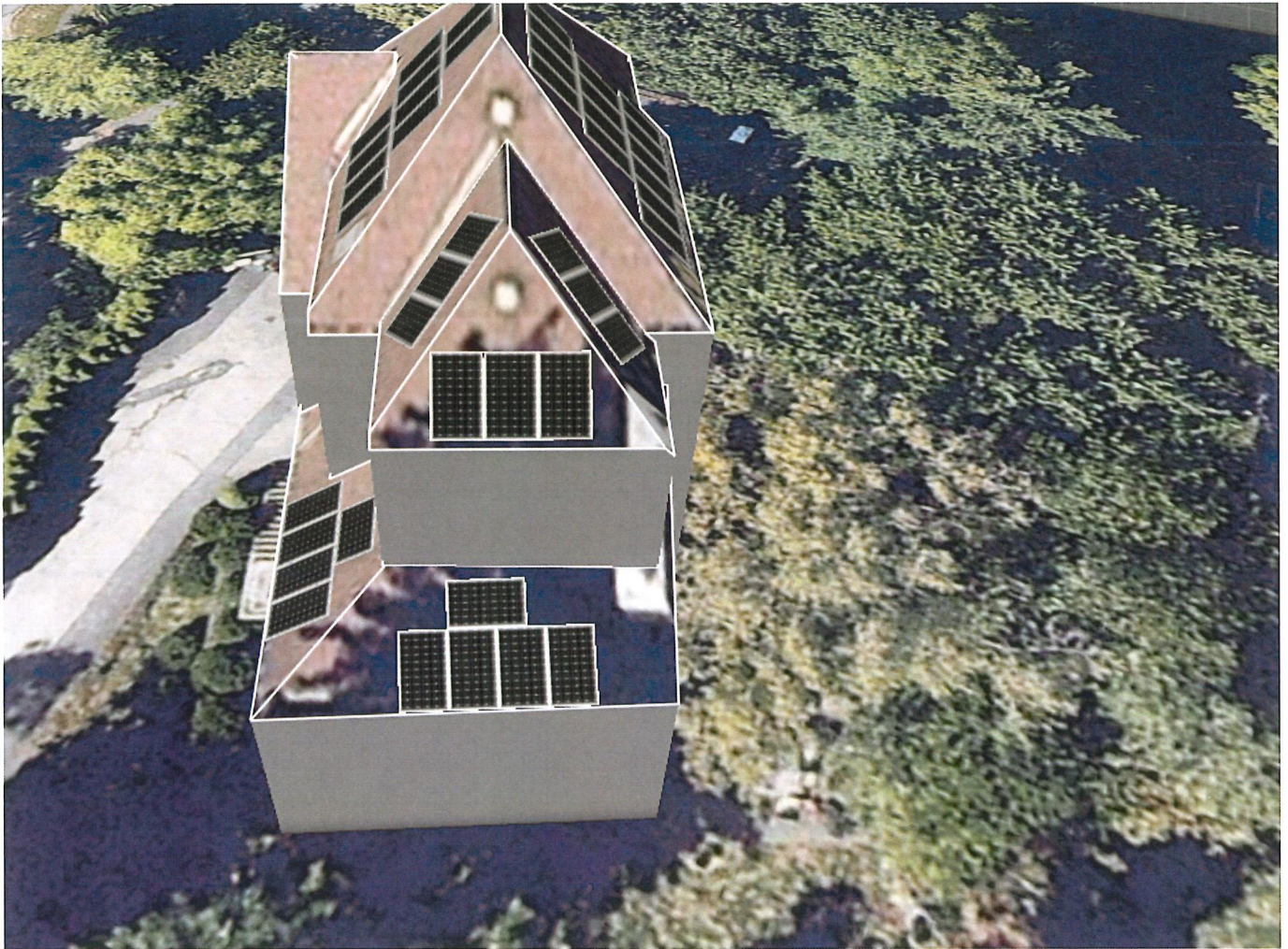
**Matthew Bouchard Residence**  
**15 Sycamore Ln. Irvington, NY 10533**



**FRONT OF HOUSE W/ PANELS**



**Matthew Bouchard Residence**  
**15 Sycamore Ln. Irvington, NY 10533**



**EAST OF HOUSE W/ PANELS**



**Matthew Bouchard Residence**  
**15 Sycamore Ln. Irvington, NY 10533**



**BACK OF HOUSE W/ PANELS**



**Matthew Bouchard Residence**  
**15 Sycamore Ln. Irvington, NY 10533**



**WEST OF HOUSE W/ PANELS**



**Matthew Bouchard Residence**  
**15 Sycamore Ln. Irvington, NY 10533**



**AERIAL OF HOUSE W/ PANELS**



Westchester  
gov.com

George Latimer  
Westchester County Executive

WESTCHESTER COUNTY DEPARTMENT OF CONSUMER PROTECTION  
WESTCHESTER COUNTY ELECTRICAL LICENSING BOARD

**MATTHEW H MARONEY III**  
**EMPIRE SOLAR SOLUTIONS LLC**  
**2-8 JOHNES STREET**  
**NEWBURGH, NY 12550**

Hereby maintains an active **Reciprocal Electrician License** in accordance with the Westchester County Electrical License Law and the Rules and Regulations of the Electrical Licensing Board. This license shall remain valid unless modified, suspended or revoked prior to the expiration date below.

License Number: **1826**

License Expires: **12/31/2022**

Certificate Issued: **1/19/2022**





**Westchester County Electrical Licensing Board**  
**Westchester County Consumer Protection**

**Master Electrician License 2022**



**Matthew H Maroney III**

**D.O.B: 5/29/1982**

**Company:**

**Empire Solar Solutions LLC**

**2-8 Johnes Street**

**Newburgh, NY 12550**

**License No. 1826**

**Expires on: 12/31/2022**

A handwritten signature in blue ink, appearing to read "Peter Borducci". The signature is stylized and fluid.

**Peter Borducci**



George Latimer  
Westchester County Executive

Westchester  
gov.com

James Maisano  
Director, Consumer Protection

## Department of Consumer Protection Home Improvement License

EMPIRE SOLAR SOLUTIONS LLC  
2-8 JOHNES STREET  
NEWBURGH, NY-12550

This license is issued in accordance with Article XVI of the Westchester County Consumer Protection Code and is valid only upon presence of the official department seal. Proof of citizenship or immigration status is not required for issuance of this license.  
NOT FOR FEDERAL PURPOSES

License Number

WC-29806-H17



Date of Expiration

08/04/2023



# Michael E. Miele, PE

Licensed Professional Engineer

Licensed In New York, New Jersey, Connecticut & California

New York License # 079676

New Jersey License # 44042

Connecticut License # 23158

California License # 31508

September 29, 2022

Village of Irvington Building Department  
The Office of the Building Inspector  
85 Main St.  
Irvington, NY 10533

Re: Matthew Bouchard - 15 Sycamore Lane, Irvington, NY 10533  
Single Family Residence, Solar Panel Loading Certification  
Village of Irvington, County of Westchester, State of New York

Dear Building Department

I am the engineer of record for the above referenced project. I can certify that the roof structure at the above referenced address can support the installation of (43) Q-Cell 365W new solar panels as per my design dated September 28, 2022.

I can hereby certify that the existing roof structure combined with the additional weight of the solar panels meets the requirements of The 2020 Residential Code of New York State, Publication Date, November 2019.

The design loads were as follows,

Roof Design Load: 40psf live load

Wind Design Load: 120mph

No additional structural members were required.

The roof is currently framed with 2x10 wood framing @ 16" O.C. The roof structural members are in compliance with ASCE 7-16 for deflection and acceptable bending stress.

If you have any questions, please feel free to call me at any time. Thanks in advance.

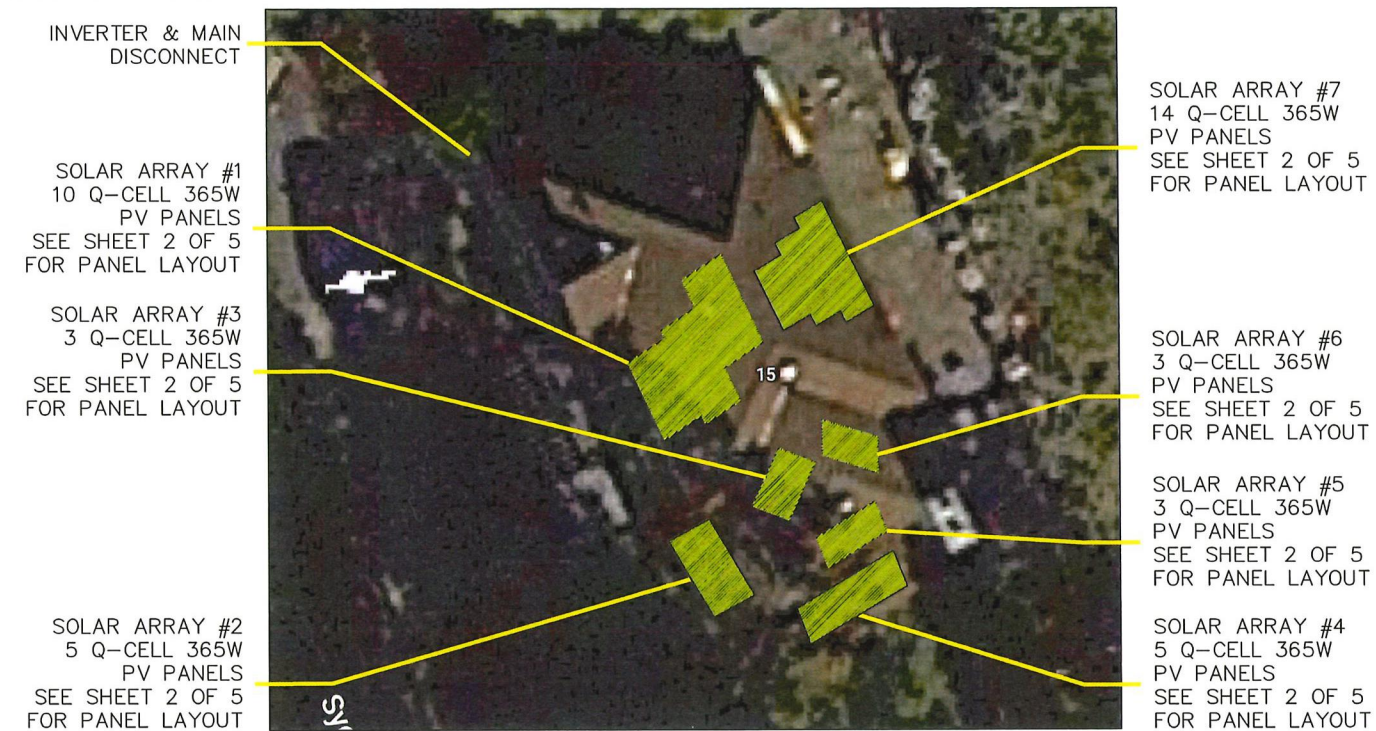
Sincerely Yours,



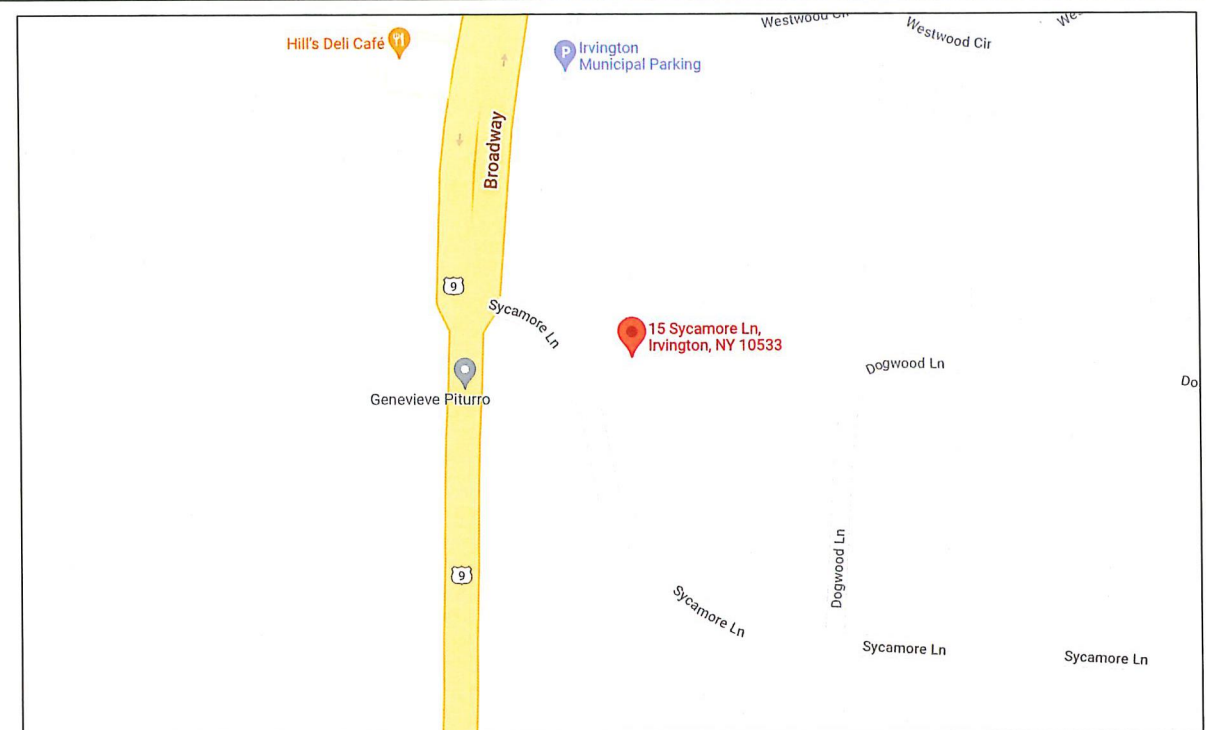
Michael E. Miele, PE







**ROOF PANEL LAYOUT PLAN:**  
NTS



**AERIAL MAP:**  
NTS

### SITE VERIFICATION NOTES:

1. PRIOR TO SUBMISSION TO MUNICIPALITY OF THE PLANS, THIS CONTRACTOR SHALL VISIT THE JOB SITE TO ASCERTAIN THE ACTUAL FIELD CONDITIONS AS THEY RELATE TO THE WORK INDICATED ON THE DRAWINGS AND DESCRIBED HEREIN. DISCREPANCIES, IF ANY, SHALL BE BROUGHT TO THE ENGINEER'S ATTENTION PRIOR TO SUBMISSION OF THE PLANS. SUBMISSION OF PLANS SHALL BE EVIDENCE THAT SITE VERIFICATION HAS BEEN PERFORMED AS DESCRIBED ABOVE.
2. CONTRACTOR TO VERIFY ALL EXISTING CONDITIONS PRIOR TO THE START OF WORK. IF EXISTING CONDITIONS VARY FROM PLANS, THE CONTRACTOR SHALL STOP WORK AND NOTIFY PROJECT ENGINEER A.S.A.P. CONTRACTOR ASSUMES ALL RESPONSIBILITY AND LIABILITY THEREFROM.
3. THE OWNER/CONTRACTOR SHALL OBTAIN ALL NECESSARY PERMITS, VERIFY ALL CONDITIONS, EXAMINE THE DESIGN DOCUMENTS AND BE RESPONSIBLE FOR ALL MEASUREMENTS, DIMENSIONS AND CONDITIONS.
4. COMMENCEMENT OF CONSTRUCTION WILL SIGNIFY THAT THE CONTRACTOR WILL HOLD THE DESIGN ENGINEER HARMLESS FOR ANY AND ALL ERRORS, OMISSIONS AND PERSONAL LIABILITY.

### PROJECT DESIGN DATA:

WORK SHALL BE COMPLETED AS PER 2020 RESIDENTIAL CODE OF NEW YORK STATE, PUBLICATION DATE: NOVEMBER 2019, NFPA 70, 2020 NATIONAL ELECTRICAL CODE AND 2018 WOOD FRAME CONSTRUCTION MANUAL LOAD CRITERIA AS FOLLOWS  
EXPOSURE CATEGORY: "B"  
GROUND SNOW LOAD: 40 PSF  
WIND SPEED: 120 MPH

### GENERAL NOTES:

1. ALL SOLAR MODULES TO BE Q-CELL 365W AND SHALL BE INSTALLED AS PER Q-CELL INSTALLATION MANUAL.
2. ALL INVERTERS TO BE ENPHASE MICRO INVERTERS ALL RACKING TO BE IRON RIDGE AND ALL RACKING TO BE INSTALLED AS PER IRON RIDGE MANUFACTURERS SPECIFICATIONS.

## RESIDENTIAL SOLAR PANEL INSTALLATION

LOCATED AT - 15 SYCAMORE LANE, IRVINGTON, NEW YORK 10533

TOWN OF GREENBURGH, WESTCHESTER COUNTY, NEW YORK



**SOLAR PANEL  
INSTALLATION  
BOUCHARD  
RESIDENCE**  
15 SYCAMORE LANE  
IRVINGTON  
NEW YORK 10533

#### REVISIONS NOTES

DWG. BY:	MEM	SCALE:	AS-NOTED
CHECKED BY:	MEM	PROJECT #:	ES-2355-22
DATE:	SEPTEMBER 28, 2022	SBL #:	2.90-45-3
MUNICIPALITY:	TOWN OF GREENBURGH	COUNTY:	WESTCHESTER

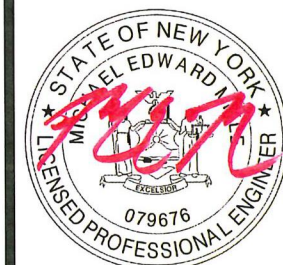
#### SYSTEM NOTES:

TOTAL SYSTEM SIZE: 15.69 KW DC SYSTEM  
PANEL TYPE: Q-CELL 365W  
OF PANELS: 43  
INVERTER TYPE: ENPHASE IQ7+  
OF INVERTERS: 43  
ARRAY #1 #2 #3 #4 #5 #6 #7  
AZIMUTH: 240 240 240 150 150 60 60  
TILT: 40 35 35 35 35 35 40  
# PANELS 10 5 3 5 3 3 14

#### PROFESSIONAL NOTES:

UNAUTHORIZED ALTERATION OR ADDITION TO THIS PLAN IS A VIOLATION OF SECTION 7209(2) OF THE NEW YORK STATE EDUCATION LAW. COPIES OF THIS MAP NOT HAVING THE SEAL OF THE ENGINEER SHALL NOT BE VALID

#### SEAL & SIGNATURE



#### DWG#

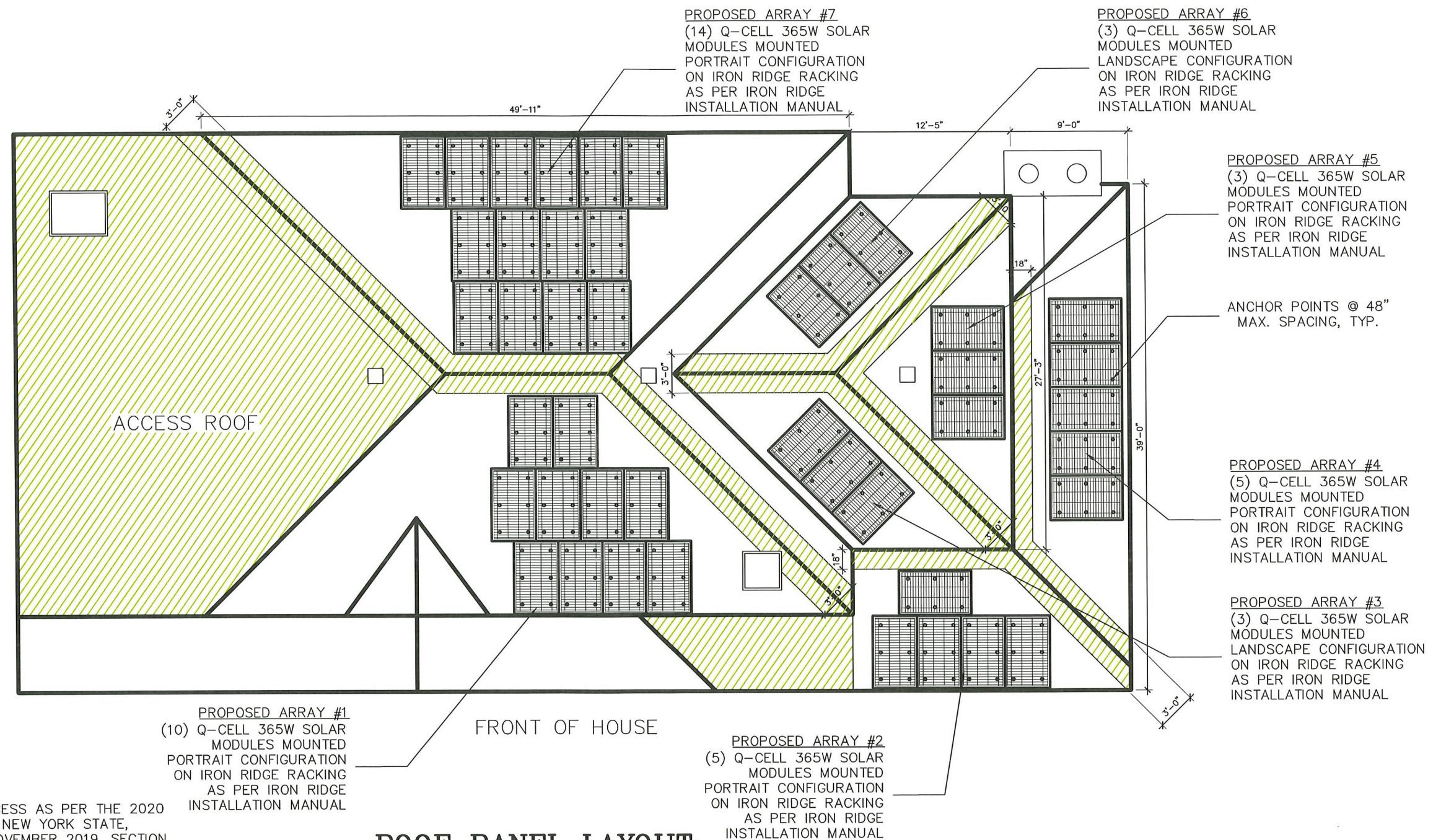
**S-1**

**PROJECT  
SITE PLAN  
AND NOTES**

DWG.

**1 OF 5**





**SOLAR PANEL  
INSTALLATION**  
**BOUCHARD  
RESIDENCE**  
 15 SYCAMORE LANE  
 IRVINGTON  
 NEW YORK 10533

**REVISIONS NOTES**

DWG. BY: <b>MEM</b>	SCALE: <b>AS-NOTED</b>
CHECKED BY: <b>MEM</b>	PROJECT #: <b>ES-2355-22</b>
DATE: <b>SEPTEMBER 28, 2022</b>	SBL #: <b>2.90-45-3</b>
MUNICIPALITY: <b>TOWN OF GREENBURGH</b>	COUNTY: <b>WESTCHESTER</b>

**SYSTEM NOTES:**

TOTAL SYSTEM SIZE: 15.69 KW DC SYSTEM

PANEL TYPE: Q-CELL 365W

OF PANELS: 43

INVERTER TYPE: ENPHASE IQ7+

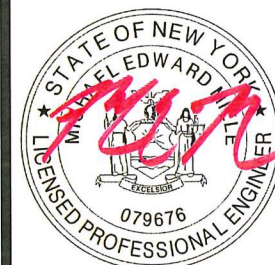
OF INVERTERS: 43

ARRAY	#1	#2	#3	#4	#5	#6	#7
AZIMUTH:	240	240	240	150	150	60	60
TILT:	40	35	35	35	35	35	40
# PANELS	10	5	3	5	3	3	14

**PROFESSIONAL NOTES:**

UNAUTHORIZED ALTERATION OR ADDITION TO THIS PLAN IS A VIOLATION OF SECTION 7209(2) OF THE NEW YORK STATE EDUCATION LAW. COPIES OF THIS MAP NOT HAVING THE SEAL OF THE ENGINEER SHALL NOT BE VALID

**SEAL & SIGNATURE**



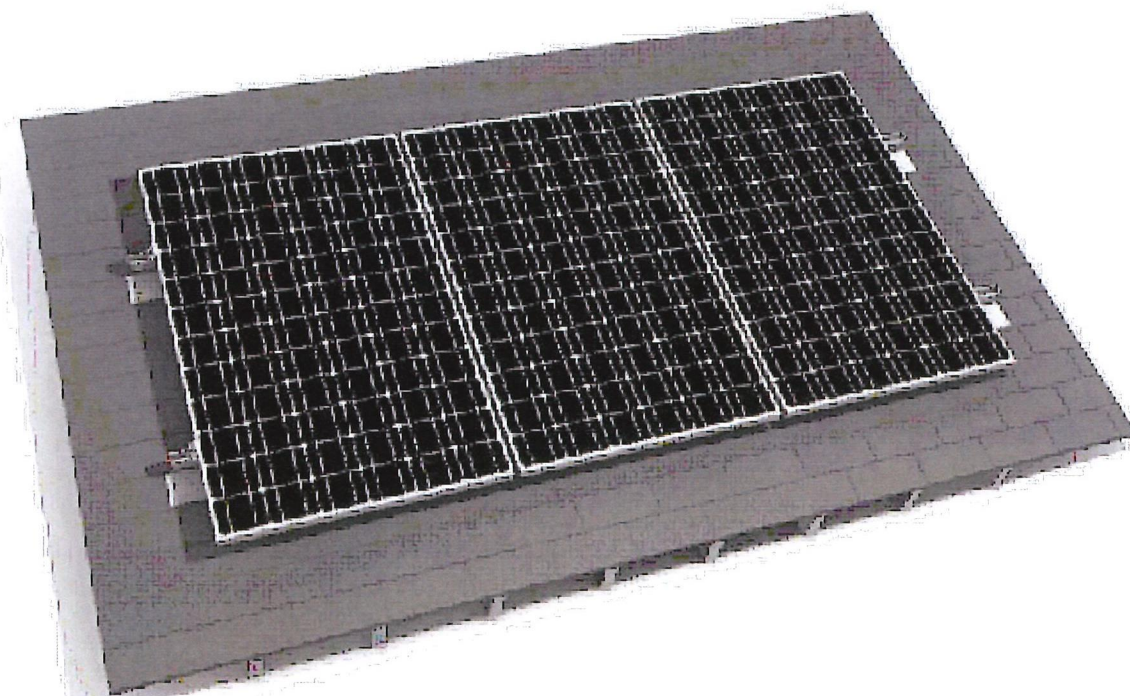
**DWG#**

**S-2**  
**SOLAR  
ROOF  
LAYOUT  
PLAN**

DWG.

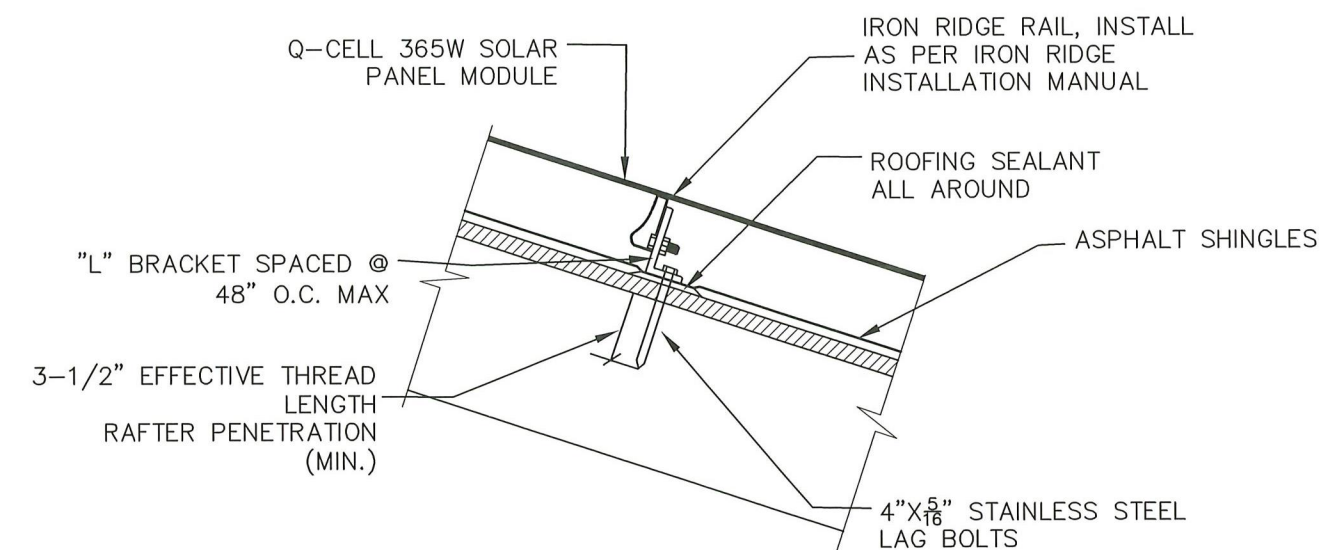
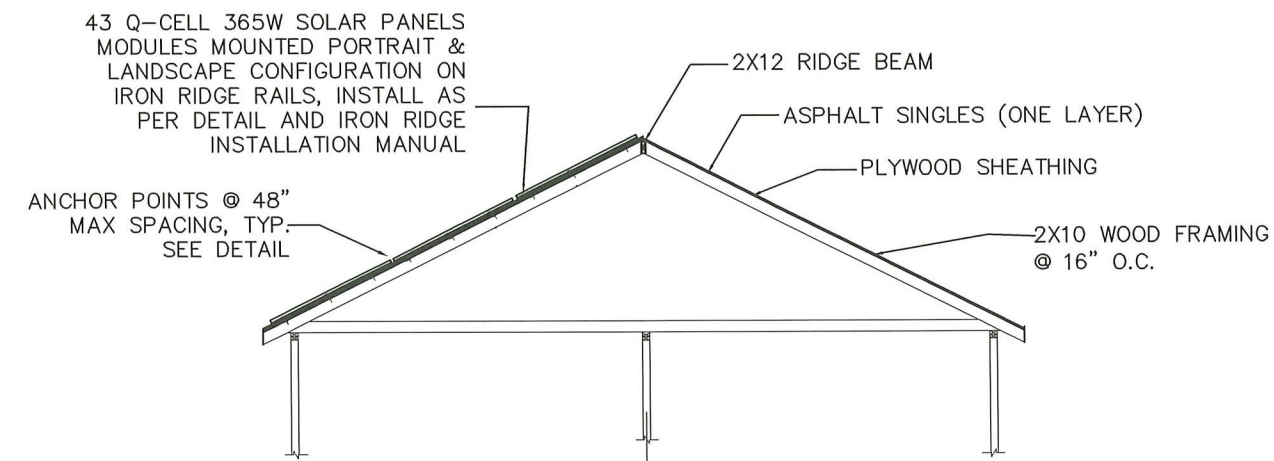
**2 OF 5**





## IRON RIDGE RACKING

XRS Maximum Spans (feet)																
Exposure	Wind Speed (mph)	0 psf Snow			10 psf Snow			20 psf Snow			30 psf Snow			40 psf Snow		
		Zone 1	Zone 2	Zone 3	Zone 1	Zone 2	Zone 3	Zone 1	Zone 2	Zone 3	Zone 1	Zone 2	Zone 3	Zone 1	Zone 2	Zone 3
Category B	90 mph	13.5	13.5	10.5	12.5	12.5	10.5	10.5	10.5	10.5	10.0	10.0	10.0	9.0	9.0	9.0
	100 mph	13.5	12.0	9.5	12.5	12.0	9.5	10.5	10.5	9.5	10.0	10.0	9.5	9.0	9.0	9.0
	110 mph	13.5	11.5	9.0	12.5	11.5	9.0	10.5	10.5	9.0	10.0	10.0	9.0	9.0	9.0	9.0
	120 mph	13.5	10.5	8.5	12.5	10.5	8.5	10.5	10.5	8.5	10.0	10.0	8.5	9.0	9.0	8.5
	130 mph	13.5	9.5	7.5	12.5	9.5	7.5	10.5	9.5	7.5	10.0	9.5	7.5	9.0	9.0	7.5
	140 mph	12.5	9.0	7.0	12.5	9.0	7.0	10.5	9.0	7.0	10.0	9.0	7.0	9.0	9.0	7.0
	150 mph	11.5	8.5	6.5	11.5	8.5	6.5	9.5	9.5	9.5	10.0	8.5	6.5	9.0	8.5	6.5
Category C	90 mph	13.5	11.0	8.5	12.5	11.0	8.5	10.5	10.5	10.5	10.0	10.0	8.5	9.0	9.0	8.5
	100 mph	13.5	9.5	8.0	12.5	9.5	8.0	10.5	9.5	8.0	10.0	9.5	8.0	9.0	9.0	8.0
	110 mph	13.0	9.5	7.5	12.5	9.5	7.5	10.5	9.5	7.5	10.0	9.5	7.5	9.0	9.0	7.5
	120 mph	12.0	8.5	7.0	12.0	8.5	7.0	10.5	8.5	7.0	10.0	8.5	7.0	9.0	8.5	7.0
	130 mph	11.0	8.0	6.5	11.0	8.0	6.5	10.5	8.0	6.5	9.5	8.0	6.5	9.0	8.0	6.5
	140 mph	10.0	7.5	6.0	10.0	7.5	6.0	10.0	7.5	6.0	9.5	7.5	6.0	8.5	7.5	6.0
	150 mph	9.5	7.0	5.5	9.5	7.0	5.5	9.5	7.0	5.5	9.0	7.0	5.5	8.5	7.0	5.5



**SOLAR PANEL  
INSTALLATION  
BOUCHARD  
RESIDENCE**  
15 SYCAMORE LANE  
IRVINGTON  
NEW YORK 10533

## REVISIONS NOTES

DWG. BY: <b>MEM</b>		SCALE: <b>AS-NOTED</b>
CHECKED BY: <b>MEM</b>		PROJECT #: <b>ES-2355-22</b>
DATE: <b>SEPTEMBER 28, 2022</b>		SBL #: <b>2.90-45.3</b>
MUNICIPALITY: <b>VILLAGE OF IRVINGTON</b>		COUNTY: <b>WESTCHESTER</b>

**SYSTEM NOTES:**

TOTAL SYSTEM SIZE: 15.69 KW DC SYSTEM

PANEL TYPE: Q-CELL 365W

OF PANELS: 43

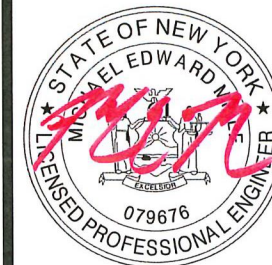
INVERTER TYPE: ENPHASE IQ7+

OF INVERTERS: 43

ARRAY	#1	#2	#3	#4	#5	#6	#7
AZIMUTH:	240	240	240	150	150	60	60
TILT:	25	20	25	20	25	25	25
# PANELS	11	4	3	5	3	3	14

**PROFESSIONAL NOTES:**

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ENGINEER SHALL NOT BE  
VALID

**DWG#**

S-3

# SOLAR PANEL ATTACHMENT PLAN I

DWC

3 OF 5



CERTIFICATION NOTES:

1. THE ROOF STRUCTURAL MEMBERS HAVE BEEN CHECKED FOR 120 MPH WIND LOADS BASED ON ASCE7-16 AND FOR COMPLIANCE WITH THE 2020 RESIDENTIAL CODE OF NEW YORK STATE, PUBLICATION DATE: NOVEMBER 2019. THERE WAS (1) LAYER OF ROOF SHINGLES INSTALLED AT THE TIME OF THE INSPECTION. THIS PLAN DOES NOT APPLY IF ANY ADDITIONAL ROOF SHINGLES LAYERS ARE INSTALLED AFTER THE SITE INSPECTION. INSTALLATION OF SOLAR PANELS WITH MORE THAN (1) LAYERS OF ROOF SHINGLES IS NEVER PERMITTED.
2. THE MOUNTING BRACKETS & HARDWARE MEET OR EXCEEDS ASCE 7-16 AND 2020 RESIDENTIAL CODE OF NEW YORK STATE, PUBLICATION DATE: NOVEMBER 2019 WITH 120 MPH WIND DESIGN. THE SYSTEM'S ATTACHMENT TO THE ROOF TO MEET OR EXCEED 2020 RESIDENTIAL CODE OF NEW YORK STATE, PUBLICATION DATE: NOVEMBER 2019.
3. ANY PLUMBING VENTS THROUGH THE ROOF ARE NOT TO BE CUT OR COVERED DURING PANEL INSTALLATION. ANY MODIFICATION OR RELOCATION OF VENTS WILL REQUIRED A PLUMBING PERMIT AND INSPECTIONS.
4. SIZES OF MEMBERS THAT WERE NOT ACCESSIBLE FOR DIRECT MEASUREMENT ARE BASED ON OBSERVATIONS OF ACCESSIBLE MEMBERS OR CONSTRUCTION DEPTH OR BOTH AND OUR KNOWLEDGE OF STANDARD CONSTRUCTION PRACTICES AT THE TIME OF CONSTRUCTION.
5. THE EXISTING ROOF AND BUILDING STRUCTURE CAN SAFELY SUSTAIN, AND DISTRIBUTE TO THE GROUND, THE ADDITIONAL LOADS IMPOSED BY THE PROPOSED WORK IN ADDITION TO ALL OTHER GRAVITY AND LATERAL LOADS AS REQUIRED BY 2020 RESIDENTIAL CODE OF NEW YORK STATE, PUBLICATION DATE: NOVEMBER 2019

MECHANICAL SPECIFICATION

Format	1717mm x 1045mm x 32mm (including frame)
Weight	19.9kg
Front Cover	3.2mm thermally pre-stressed glass with anti-reflection technology
Back Cover	Composite film
Frame	Black anodised aluminium
Cell	6 x 20 monocrystalline Q-ANTUM solar half cells
Junction box	53-101mm x 32-60mm x 15-18 mm Protection class IP67, with bypass diodes
Cable	4mm² Solar cable; (+) ≥1150mm, (-) ≥1150mm
Connector	Stäubli MC4; IP68

ELECTRICAL CHARACTERISTICS

POWER CLASS	350	355	360	365	370	
MINIMUM PERFORMANCE AT STANDARD TEST CONDITIONS, STC¹ (POWER TOLERANCE +6W/-0W)						
Power at MPP²	P <sub>MPP</sub> [W]	350	355	360	365	370
Short Circuit Current²	I <sub>SC</sub> [A]	10.97	11.00	11.04	11.07	11.10
Open Circuit Voltage²	V <sub>OC</sub> [V]	41.11	41.14	41.18	41.21	41.24
Current at MPP	I <sub>MPP</sub> [A]	10.37	10.43	10.49	10.56	10.62
Voltage at MPP	V <sub>MPP</sub> [V]	33.76	34.03	34.31	34.58	34.84
Efficiency³	η [%]	≥19.5	≥19.8	≥20.1	≥20.3	≥20.6
MINIMUM PERFORMANCE AT NORMAL OPERATING CONDITIONS, NMOT⁴						
Power at MPP	P <sub>MPP</sub> [W]	262.6	266.3	270.1	273.8	277.6
Short Circuit Current	I <sub>SC</sub> [A]	8.84	8.87	8.89	8.92	8.95
Open Circuit Voltage	V <sub>OC</sub> [V]	38.77	38.80	38.83	38.86	38.90
Current at MPP	I <sub>MPP</sub> [A]	8.14	8.20	8.26	8.31	8.37
Voltage at MPP	V <sub>MPP</sub> [V]	32.24	32.48	32.71	32.94	33.17

¹Measurement tolerances P<sub>MPP</sub> ±3%; I<sub>SC</sub> V<sub>OC</sub> ±5% at STC; 1000W/m², 25±2°C, AM 1.5 according to IEC 60904-3-3/800W/m², NMOT, spectrum AM 1.5

Q CELLS PERFORMANCE WARRANTY

PERFORMANCE AT LOW IRRADIANCE

TEMPERATURE COEFFICIENTS

Temperature Coefficient of I <sub>SC</sub>	α [%/K]	+0.04	Temperature Coefficient of V <sub>OC</sub>	β [%/K]	-0.27
Temperature Coefficient of P <sub>MPP</sub>	γ [%/K]	-0.34	Nominal Module Operating Temperature	NMOT [°C]	43±3

PROPERTIES FOR SYSTEM DESIGN

Maximum System Voltage	V <sub>sys</sub> [V]	1000	PV module classification	Class II
Maximum Reverse Current	I <sub>r</sub> [A]	20	Fire Rating based on ANSI/UL 61730	C/TYPE 2
Max. Design Load, Push/Pull	[Pa]	3600/2660	Permitted Module Temperature on Continuous Duty	-40°C - +85°C
Max. Test Load, Push/Pull	[Pa]	5400/4000		

QUALIFICATIONS AND CERTIFICATES

Quality Controlled PV - TÜV Rheinland, IEC 61215:2016, IEC 61730:2016. This data sheet complies with DIN EN 50360. GCPV Certification ongoing.

Not: Installation instructions must be followed. See the installation and operating manual or contact our technical service department for further information on approved installation and use of this product.

Hanwha Q CELLS GmbH  
Sonnenallee 17-21, 06766 Bitterfeld-Wolfen, Germany | TEL +49 (0)3494 66 99-23444 | FAX +49 (0)3494 66 99-23000 | EMAIL sales@q-cells.com | WEB www.q-cells.com

Engineered in Germany



Enphase IQ 7 and IQ 7+ Microinverters

INPUT DATA (DC)	IQ7-60-2-US	IQ7PLUS-72-2-US
Commonly used module pairings¹	235 W - 350 W +	235 W - 440 W +
Module compatibility	60-cell PV modules only	60-cell and 72-cell PV modules
Maximum input DC voltage	48 V	60 V
Peak power tracking voltage	27 V - 37 V	27 V - 45 V
Operating range	16 V - 48 V	16 V - 60 V
Min/Max start voltage	22 V / 48 V	22 V / 60 V
Max DC short circuit current (module I <sub>sc</sub> )	15 A	15 A
Overvoltage class DC port	II	II
DC port backfeed current	0 A	0 A
PV array configuration	1 x 1 ungrounded array; No additional DC side protection required; AC side protection requires max 20A per branch circuit	
OUTPUT DATA (AC)	IQ 7 Microinverter	IQ 7+ Microinverter
Peak output power	250 VA	295 VA
Maximum continuous output power	240 VA	290 VA
Nominal (L-L) voltage/range²	240 V / 211-264 V	240 V / 211-264 V
Maximum continuous output current	1.0 A (240 V)	1.21 A (240 V)
Nominal frequency	60 Hz	60 Hz
Extended frequency range	47 - 68 Hz	47 - 68 Hz
AC short circuit fault current over 3 cycles	5.8 Arms	5.8 Arms
Maximum units per 20 A (L-L) branch circuit³	16 (240 VAC)	13 (208 VAC)
Overvoltage class AC port	III	III
AC port backfeed current	18 mA	18 mA
Power factor setting	1.0	1.0
Power factor (adjustable)	0.85 leading ... 0.85 lagging	0.85 leading ... 0.85 lagging
EFFICIENCY	@240 V @208 V	@240 V @208 V
Peak efficiency	97.6 %	97.5 %
CEC weighted efficiency	97.0 %	97.0 %
MECHANICAL DATA		
Ambient temperature range	-40°C to +65°C	
Relative humidity range	4% to 100% (condensing)	
Connector type	MC4 (or Amphenol H4 UTX with additional Q-DCC-5 adapter)	
Dimensions (HxWxD)	212 mm x 175 mm x 30.2 mm (without bracket)	
Weight	1.08 kg (2.38 lbs)	
Cooling	Natural convection - No fans	
Approved for wet locations	Yes	
Pollution degree	PD3	
Enclosure	Class II double-insulated, corrosion resistant polymeric enclosure	
Environmental category / UV exposure rating	NEMA Type 6 / outdoor	
FEATURES		
Communication	Power Line Communication (PLC)	
Monitoring	Enlighten Manager and MyEnlighten monitoring options. Both options require installation of an Enphase IQ Envoy.	
Disconnecting means	The AC and DC connectors have been evaluated and approved by UL for use as the load-break disconnect required by NEC 690.	
Compliance	CA Rule 21 (UL 1741-SA) UL 62109-1, UL1741/IEEE1547, FCC Part 15 Class B, ICES-0003 Class B, CAN/CSA-C22.2 NO. 107.1-01 This product is UL Listed as PV Rapid Shut Down Equipment and conforms with NEC-2014 and NEC-2017 section 690.12 and C22.1-2015 Rule 64-218 Rapid Shutdown of PV Systems, for AC and DC conductors, when installed according manufacturer's instructions.	

1. No enforced DC/AC ratio. See the compatibility calculator at <https://enphase.com/en-us/support/module-compatibility>.  
2. Nominal voltage range can be extended beyond nominal if required by the utility.  
3. Limits may vary. Refer to local requirements to define the number of microinverters per branch in your area.

To learn more about Enphase offerings, visit [enphase.com](https://enphase.com)



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SOLAR PANEL  
INSTALLATION  
BOUCHARD  
RESIDENCE  
15 SYCAMORE LANE  
IRVINGTON  
NEW YORK 10533

REVISIONS NOTES

DWG. BY:	MEM	SCALE:	AS-NOTED
CHECKED BY:	MEM	PROJECT #:	ES-2355-22
DATE:	SEPTEMBER 28, 2022	SBL #:	2.90-45-3
MUNICIPALITY:	VILLAGE OF IRVINGTON	COUNTY:	WESTCHESTER

SYSTEM NOTES:

TOTAL SYSTEM SIZE: 15.69 KW DC SYSTEM

PANEL TYPE: Q-CELL 365W

OF PANELS: 43

INVERTER TYPE: ENPHASE IQ7+

OF INVERTERS: 43

ARRAY	#1	#2	#3	#4	#5	#6	#7
AZIMUTH:	240	240	240	150	150	60	60
TILT:	25	20	25	20	25	25	25
# PANELS	11	4	3	5	3	3	14

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SEAL & SIGNATURE



DWG#

S-4

SOLAR  
PANEL &  
INVERTER  
SPECIFICATIONS

DWG.

4 OF 5



AC & DC GROUNDING CONDUCTORS PER  
NEC ARTICLE 690.47(c)(2)  
CONNECTED AS PER 250.64(c)(2)

ALL CONDUCTORS ARE TO BE  
COPPER UNLESS NOTED OTHERWISE

ALL EXTERIOR MOUNTED COMBINERS,  
JUNCTION BOXES, TROUGHS, DISCONNECTS,  
ETC. SHALL BE NEMA 3R RATED.

- CB1

AMPACITY: 20 AMP BREAKER  
VOLTAGE: 240V  
SINGLE PHASE + GROUND
- CB2

AMPACITY: 20 AMP BREAKER  
VOLTAGE: 240V  
SINGLE PHASE + GROUND
- CB3

AMPACITY: 20 AMP BREAKER  
VOLTAGE: 240V  
SINGLE PHASE + GROUND
- CB4

AMPACITY: 20 AMP BREAKER  
VOLTAGE: 240V  
SINGLE PHASE + GROUND
- CB5

AMPACITY: 10 AMP BREAKER  
VOLTAGE: 240V  
SINGLE PHASE + GROUND

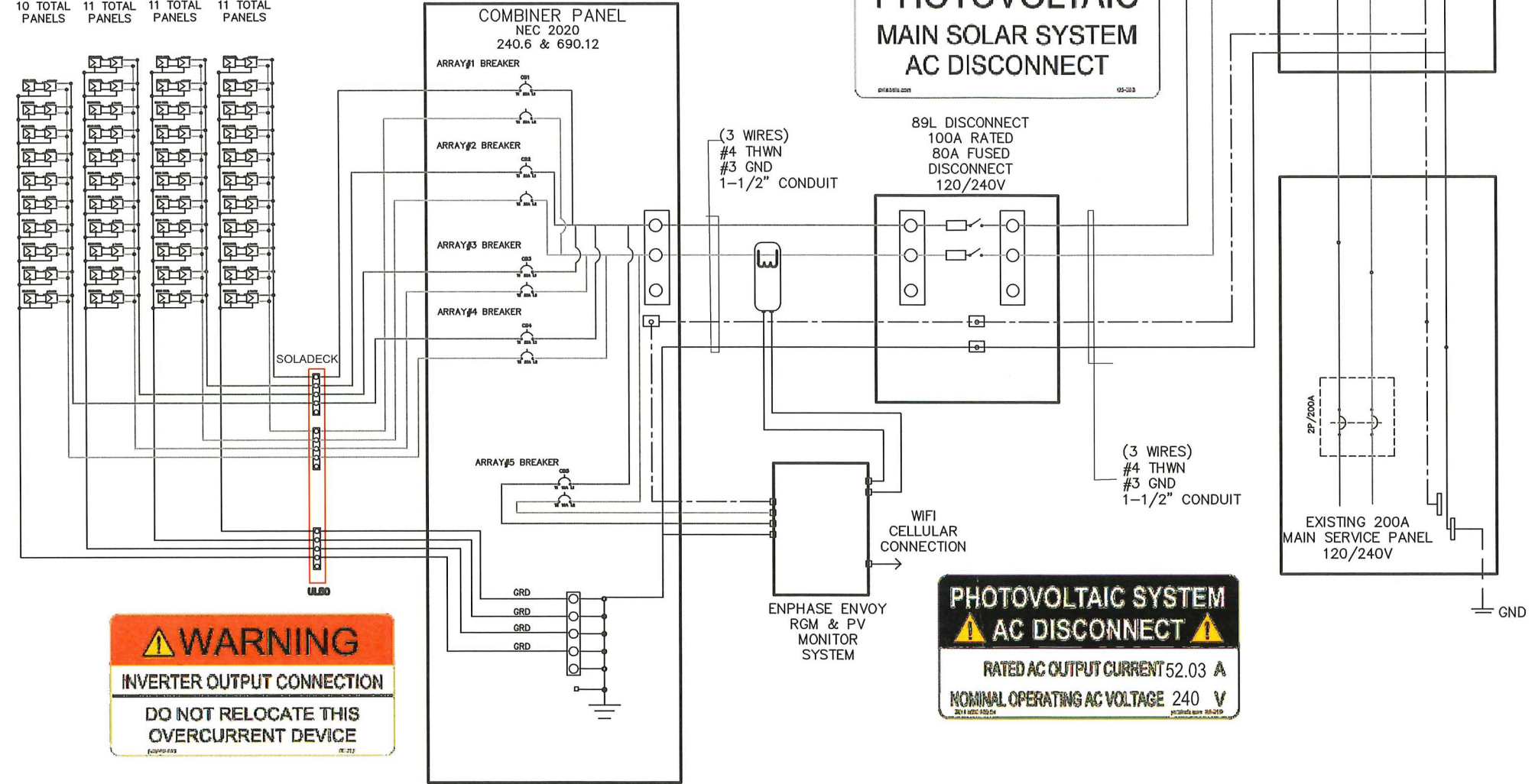
**WARNING**  
**ELECTRIC SHOCK HAZARD**  
DO NOT TOUCH TERMINALS  
ON BOTH THE LINE AND  
LOAD SIDES MAY BE ENERGIZED  
IN THE OPEN POSITION

CIRCUIT 4  
1 STRING  
X 10  
MODULES  
10 TOTAL  
PANELS

CIRCUIT 3  
1 STRING  
X 11  
MODULES  
11 TOTAL  
PANELS

CIRCUIT 2  
1 STRING  
X 11  
MODULES  
11 TOTAL  
PANELS

CIRCUIT 1  
1 STRING  
X 11  
MODULES  
11 TOTAL  
PANELS



WIRE AMPACITY  
NEC TABLE 310.15(B)(16)  
#10 THWN Cu35A RATED  
#8 THWN Cu50A RATED  
#6 THWN Cu65A RATED  
#4 THWN Cu85A RATED

AC SYSTEM SIZE = # OF PANELS X  
INVERTER OUTPUT RATING

43 PANELS X 0.290 = 12.47 KW/AC

CONFIRM LINE SIDE VOLTAGE AT ELECTRIC  
UTILITY SERVICE ENTRANCE BEFORE  
CONNECTING INVERTER AND ENSURE  
PROPER OPERATIONAL RANGE REQUIRED  
BY SYSTEM INVERTER.

DC CONDUITS MAY BE RUN ABOVE OR BELOW  
ROOF.  
PROVIDE SOLAIDECK JUNCTION/FLASHING WHEN  
PENETRATING THE ROOF WITH DC CONDUCTORS

ALL DC CONDUCTORS WITHIN THE BUILDING  
ENVELOPE MUST BE IN METALLIC CONDUIT.

DC CONDUCTORS MUST BE 90° RATED.

INTERCONNECTION TO UTILITY AND SYSTEM  
GROUNDING PER NEC-2020 ARTICLE 690

PROVIDE SIGNAGE AS REQUIRED BY  
NEC-2020 ARTICLE 690.

ALL OUTDOOR EQUIPMENT SHALL BE A  
MINIMUM OF NEMA-3R RATED.

**WARNING**  
**INVERTER OUTPUT CONNECTION**  
DO NOT RELOCATE THIS  
OVERCURRENT DEVICE

**PHOTOVOLTAIC SYSTEM**  
**AC DISCONNECT**  
RATED AC OUTPUT CURRENT 52.03 A  
NOMINAL OPERATING AC VOLTAGE 240 V



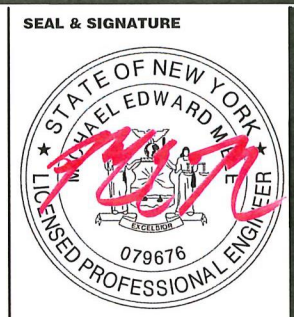
SOLAR PANEL  
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OF PANELS:	43
INVERTER TYPE:	ENPHASE IQ7+
OF INVERTERS:	43
ARRAY	#1 #2 #3 #4 #5 #6 #7
AZIMUTH:	240 240 240 150 150 60 60
TILT:	25 20 25 20 25 25 25
# PANELS	11 4 3 5 3 3 14

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**S-5**

SOLAR PANEL  
3-LINE  
DIAGRAM

DWG.  
5 OF 5