Copake Fire District

PV Solar Power Installation Information

Install Information:

Address: _____

Array Type (Please Circle): FRAME FLEXIBLE ROLL SHINGLE

Array Location (Please reference from looking at the front of the house. Ex: Rear roof, On ground 50 feet from right side, etc.)

_____

DC Isolation Switch Location: _____

AC Isolation Switch Location: _____

Battery Storage Location: _____

Service Cut-off Location: _____

Inverter Location: _____

Emergency Contact Information:

Property Owner Name: _____

Address (if different from installed location):_____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Installer Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Main Phone: _____ Emergency Phone: _____