

CONFIRMATION OF LOCAL LAND USE APPROVAL

Energy Storage Planning and Zoning Confirmation Form

Applicant Information				
Company Name:				
Contact Name:	Title:			
Email Address:	Telephone	Telephone Number:		

Project Information				
Project Name:				
Project Address:				
Energy Storage Size kW/kWh (AC):				
Solar Project Size AC/ DC (if applicable):				

Municipality Information			
Municipality Name:			
Contact Name:	Title:		
Email Address:	Teleph	Telephone Number:	

Required Energy Storage Land Use Approvals			
Land Use Approval and Date Approved (check all that apply):			
	Special Use Permit	Date Approved:	
	Site Plan Review	Date Approved:	
	SEQR Negative Declaration (if municipality is lead agency)	Date Approved:	
	Other (list type):	Date Approved:	
	No Land Use or Zoning Approval is required for this project		

NYSERDA respectfully requests that the municipality sign a copy of this form acknowledging and confirming the above is accurate and correct, and that this project has received all required local land use approvals for the energy storage project. NYSERDA may contact the municipality to confirm approvals if needed.

ACKNOWLEDGED & CONFIRMED BY MUNICIPALITY

Signature

Date

Print Name

Title