## STRUCTURAL CRITERIA CHECKUST A

## STRUCTURAL CRITERIA CHECKLIST 4A FOR RESIDENTIAL FLUSH-MOUNTED SOLAR ARRAYS

## 1. ROOF CHECKS

	r's Site Audit of Existing Conditions: oof without a reroof overlay?		□ Y	□ N
	ture appear structurally sound, witho	out signs of alterations		
or significant struct	□ Y	□ N		
B. Roof Structure Data:	(			
1) Measured roof slope				:12
2) Measured ratter spa	cing (center-to-center):			inch
3) Type of roof framing	(rafter or manufactured truss):		☐ Rafter	☐ Truss
4) Measured rafter size	(e.g. 13/4 x 33/4, not 2x4):		x	inch
5) Measured rafter ho	5) Measured rafter horizontal span (see Figure 4):			
6) Horizontal rafter spa	6) Horizontal rafter span per Table 2:			
7) Is measured horizon	tal rafter span less than Table 2 span	1?	□ Y □ N	☐ Truss
2. SOLAR ARRAY CHECKS				
A. Flush-mounted Solar Arra	•			
	nodules (panels) parallel to the plane		□ Y □ Y	□N
2) Is there a 2" to 10" gap between underside of module and the roof surface?				
	erhang any roof edges (ridges, hips, g		□ Y	□ N
	port components weigh no more tha		□ ү	
4 psf for photovoltaic arrays or 5 psf for solar thermal arrays?  C. Does the array cover no more than half of the total roof area (all roof planes)?				
			□ Y	□ IN
D. Are solar support component manufacturer's project-specific completed worksheets, tables with relevant cells circled, or web-based calculator results attached?				□ N
E. Is a roof plan of the module and anchor layout attached? (see Figure 2)				
F. Downward Load Check (A	· · · · · · · · · · · · · · · · · · ·	,Ba. c = /	□ Y	
	prizontal spacing (see Figure 2):		,_	"ft-in
2) Horizontal anchor s				"ft-in
3) Is proposed anchor	horizontal spacing equal to or less th	han Table 1 spacing?	□ Ү	□ N
G. Wind Uplift Check (Ancho				
1) Anchor fastener dat				
	crew, hanger bolt or self-drilling scre	₽W:		inch
b. Embedment dep				inch
c. Number of screw	s per anchor (typically one):			
d. Are 5/16" diame	ter lag screws with 2.5" embedment	into the rafter		
used, OR does th	e anchor fastener meet the manufac	cturer's guidelines?	□ Y	□N
3. SUMMARY				
☐ A. All items above are check	xed YES. No additional calculations ar	re required.		
☐ B. One or more items are ch California-licensed civil or struc	necked NO. Attach project-specific dr ctural engineer.	awings and calculations sta	mped and signe	ed by a
Job Address:	Р	ermit #:		
Contractor/Installer:	L Date: F	icense # & Class:		
Signature:	Date: F	hone #:		