

# ACCESSORY DWELLING UNITS

## SUPPLEMENTAL LAND USE STANDARDS REVIEW

### APPLICANT INFORMATION

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### PROPERTY INFORMATION

*Note: Property owner authorization is required if applicant does not own the property.*

Property Owner Name: \_\_\_\_\_  
Property Owner Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Property Size: \_\_\_\_\_ square feet Zone District: \_\_\_\_\_  
If a PD zoning, provide ODP name: \_\_\_\_\_

### ACCESSORY DWELLING UNIT SUPPLEMENTAL STANDARDS

*Accessory Dwelling Units (ADUs) proposed to be detached or constructed as an addition to a single-family unit shall be subject to the following Review of Supplemental Standards.*

#### General Standards

- Yes  No Are any waivers or variances requested?
- Yes  No Are there any other ADUs on this lot?
- Yes  No Is the lot size greater than 9,000 square feet?
- Yes  No Has the owner of the property on which the ADU is proposed to be located completed and recorded an Owner Occupancy Certificate?

#### Dimensional Standards and Location

- Yes  No Does the proposed ADU comply with all primary structure dimensional standards for the applicable zone district?
- Yes  No Is the height of the proposed ADU 30 feet or less?
- Yes  No Is the proposed ADU located in front of the primary dwelling unit?

Design Requirements

- Yes    No   Does the proposed ADU exceed 700 square feet of gross floor area or contain more than one bedroom?
- Yes    No   Are any external alterations that would change the residential character of the property proposed?
- Yes    No   Is the exterior of the proposed ADU similar in appearance to that of the existing primary dwelling unit including, but not limited to, materials, color, roof pitch, and detailing?
- Yes    No   If the ADU is proposed to be located a second floor and accessed by a separate external stairway, is the stairway located on any street facing facade?
- Yes    No   Have all required parking spaces been provided in accordance with Article 8?

*This permit certifies that you agree to comply with all applicable regulations.*

**SIGNATURE OF APPLICANT:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

***For Staff to Complete***

Meets all required standards

Does not meet all required standards

ZR Case # \_\_\_\_\_

Reviewed By: \_\_\_\_\_