



COMMUNITY DEVELOPMENT

APPLICATION FOR ACCESSORY DWELLING UNIT

44933 N. Fern Avenue
Lancaster, CA 93534
(661)723-6144
www.cityoflancasterca.org

PLEASE PRINT CLEARLY

ADU Applications will be deemed "submitted" when this application and the plans have been received, and all review fees have been paid.

A. PROJECT INFORMATION

Property Address:		Assessor Parcel Number (APN):	
Property Owner's Name:			
Property Owner's Address:			
Construction Type:	Zone:	ADU Square Footage:	
Is the subject property currently single-family or multifamily?			
Do you plan to rent out the ADU/JADU?		Approx. Monthly Rent: \$	

B. TYPES OF ACCESSORY DWELLING UNIT PROPOSED

<input type="checkbox"/> New Attached	<input type="checkbox"/> New Detached	<input type="checkbox"/> Junior Accessory Dwelling Unit
<input type="checkbox"/> Conversion/Rebuild of Living Area and/or Attached Garage	<input type="checkbox"/> Conversion/Rebuild of Accessory Structure and/or Detached Garage	

C. APPLICANT CONTACT

ENGINEER/ARCHITECT

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

I DO BY MY SIGNATURE ON THIS AGREEMENT absolve the City of Lancaster of all liabilities regarding any deed restrictions that may be applicable to the property described herein.

Applicant Name:	Signature:	Date:
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D. PROPERTY OWNER'S SIGNATURE

I/We, _____ (Print), declare under penalty of perjury that I/we am/are the owner(s) of property involved in this application and that the statements and answers herein contained and the information herewith submitted are in all respects true and correct to the best of my knowledge and belief.

I additionally acknowledge that any proposed JADUs require owner occupancy of the property pursuant to Government Code Section 65852.22. Initial: _____

Property Owner Name:	Signature:	Date:
Property Owner Name:	Signature:	Date:
Property Owner Name:	Signature:	Date:
Property Owner Name:	Signature:	Date:

E. PROJECT DETAILS – COMPLETE THE APPLICABLE SECTION FOR YOUR ADU TYPE

1. Converted Space ADU (Single-Family)

Site Development Standard	ADU Requirement	Existing Residence	Proposed ADU	Compliance Verification (Staff Use Only)
Minimum Size	150 SF			<input type="checkbox"/>
Maximum Size	Fully within an existing or proposed SFD; or fully within an accessory structure plus up to 150 SF for ingress/egress			
Access	Independent exterior access			<input type="checkbox"/>
Setbacks	4' min	<i>ft</i>	<i>ft</i>	<input type="checkbox"/>
Parking Spaces	Parking for primary unit only			<input type="checkbox"/>

2. Attached New Construction ADU (Single-Family)

Site Development Standard	ADU Requirement	Existing Residence	Proposed ADU	Compliance Verification (Staff Use Only)
Minimum Size	150 SF			<input type="checkbox"/>
Maximum Size	0-1 Bedroom: 850 SF 2+ Bedroom: 1,200 SF			
Height	25' and 2 Stories max	<i>ft</i>	<i>ft</i>	<input type="checkbox"/>
Setbacks	Front: 25' min Side & Rear: 4' min	<i>ft</i>	<i>ft</i>	<input type="checkbox"/>
Lot Coverage (Applies to ADUs over 850 SF)	RR-2.5/RR-1/SRR: 40% max R-15,000/10,000: 40% max R-7,000/MDR/HDR: 50% max Mixed Use: 60% max	%	%	<input type="checkbox"/>
Parking Spaces (Applies to ADUs over 850 SF, outside transit buffer)	One 10x20' space, plus parking for primary unit			<input type="checkbox"/>

3. Detached New Construction ADU (Single-Family)

Site Development Standard	ADU Requirement	Existing Residence	Proposed ADU	Compliance Verification (Staff Use Only)
Minimum Size	150 SF			<input type="checkbox"/>
Maximum Size	0-1 Bedroom: 850 SF 2+ Bedroom: 1,200 SF			
Height	18' max, 20' with roof pitch	<i>ft</i>	<i>ft</i>	<input type="checkbox"/>
Setbacks	Front: 25' min Side & Rear: 4' min From Primary Unit: 10' min	<i>ft</i>	<i>ft</i>	<input type="checkbox"/>
Lot Coverage (Applies to ADUs over 850 SF)	RR-2.5/RR-1/SRR: 40% max R-15,000/10,000: 40% max R-7,000/MDR/HDR: 50% max Mixed Use: 60% max	%	%	<input type="checkbox"/>
Parking Spaces (Applies to ADUs over 850 SF, outside transit buffer)	One 10x20' space, plus parking for primary unit			<input type="checkbox"/>

4. Detached ADU (Multifamily)

Site Development Standard	ADU Requirement	Existing Residences	Proposed ADU(s)	Compliance Verification (Staff Use Only)
Number of Units	2 max			<input type="checkbox"/>
Minimum Size	150 SF			<input type="checkbox"/>
Maximum Size	0-1 Bedroom: 850 SF 2+ Bedroom: 1,200 SF	<i>sq ft</i>	<i>sq ft</i>	
Height	18' max, 20' with roof pitch	<i>ft</i>	<i>ft</i>	<input type="checkbox"/>
Setbacks	Front: 25' min Side & Rear: 4' min	<i>ft</i>	<i>ft</i>	<input type="checkbox"/>
Lot Coverage (Applies to ADUs over 850 SF)	RR-2.5/RR-1/SRR: 40% max R-15,000/10,000: 40% max R-7,000/MDR/HDR: 50% max Mixed Use: 60% max	%	%	<input type="checkbox"/>
Parking Spaces (Applies to ADUs over 850 SF, outside transit buffer)	One 10x20' space per ADU, plus parking for primary units			<input type="checkbox"/>

5. Converted Non-Livable Space ADU (Multifamily)

Site Development Standard	ADU Requirement	Existing Residences	Proposed ADU(s)	Compliance Verification (Staff Use Only)
Number of Units	Up to 25% of the number of primary units			<input type="checkbox"/>
Minimum Size	150 SF			<input type="checkbox"/>
Maximum Size	Fully within the structure of an existing or proposed multifamily dwelling	<i>sq ft</i>	<i>sq ft</i>	
Parking Spaces (Applies to ADUs over 850 SF, outside transit buffer)	Parking for primary units only			<input type="checkbox"/>

*Junior Accessory Dwelling Units (JADUs) are subject to the provisions of Government Code Section 65852.22.

F. PROPERTY OWNER VERIFICATION

State of California
County of _____)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

On _____ before me, _____ personally appeared
(insert name and title of the officer)
_____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
WITNESS my hand and official seal.

Signature _____ (Seal)