

**File Name:**

**File Number:**

**Instructions for Applicants**

**Please read and follow all instructions on your application carefully.** If you have any questions about the process or your project, it is strongly recommended that you speak with staff prior to submitting your application to help ensure that processing can advance in a timely manner. Every application must include this cover sheet, the application/checklist and all required items, and a notarized affidavit of ownership (if applicable).

**Specific Type of Land Use Application to be submitted (check all that apply):**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Accessory Dwelling Unit             | <input type="checkbox"/> Landscaping (not with PDR app) | <input type="checkbox"/> Wireless Communication Facility        |
| <input type="checkbox"/> Appeal                              | <input type="checkbox"/> Project Design Review (PDR)    | <input type="checkbox"/> Other (please specify): _____          |
| <input type="checkbox"/> Binding Site Plan                   | <input type="checkbox"/> Rezone/PUD                     |   |
| <input type="checkbox"/> Boundary Line Adjustment/ Lot Comb. | <input type="checkbox"/> Short Subdivision (Short Plat) | <input type="checkbox"/> Comprehensive Plan Suggested Amendment |
| <input type="checkbox"/> Conditional Use Permit              | <input type="checkbox"/> Subdivision (Long Plat)        | <input type="checkbox"/> Comprehensive Plan Amendment           |
| <input type="checkbox"/> Environmental Review (SEPA)         | <input type="checkbox"/> Variance                       |   |

**Please Print or Type Legibly**

|  |        |      |                         |
|--|--------|------|-------------------------|
| <b>Applicant:</b>  |        |      | Phone:                  |
| Address:   |        |      | Cell:                   |
| City:  | State: | Zip: | Fax:                    |
| E-Mail:  |        |      |                         |
| <b>Contact Person, if different:</b>   |        |      | Phone:                  |
| Address:   |        |      | Cell:                   |
| City:  | State: | Zip: | Fax:                    |
| E-Mail:  |        |      |                         |
| <b>Property Owner(s), if different:</b>  |        |      | Phone:                  |
| Address:   |        |      | Cell:                   |
| City:  | State: | Zip: | Fax:                    |
| E-Mail:  |        |      |                         |
| <b>Site Address(es):</b>   |        |      | Zoning:                 |
| Assessor Parcel Number(s) – (APNs):  |        |      | Comp. Plan Designation: |
| <b>Description of Proposal:</b>  |        |      |                         |
| I/We certify that the information provided in this application, including all submittals and attachments, is true and correct to the best of my/our knowledge. |        |      |                         |
| Signature of Applicant/Agent: _____  |        |      | Date: _____             |
| Signature of Property Owner: _____   |        |      | Date: _____             |

# Accessory Dwelling Unit Application

File Name:

File Number:

A Land Use Application for an Accessory Dwelling Unit is deemed complete when it is accompanied by the required items identified below. Please be advised that additional information may be required during the review process in order to respond to or resolve particular issues. No application shall be considered complete if any of the required information is missing. The Community Development Director may waive any of these items, pursuant to LMC Section 1.35.015(A), upon written request by the applicant and a finding that the item is not necessary to review the application. Additional copies of certain items will be required later in the process.

**REQUIRED ITEMS - ALL MATERIALS SHALL BE ELECTRONIC (PDF) UNLESS OTHERWISE NOTED**

- 1. Land Use Application Cover Sheet, with original signature(s).
- 2. Electronic (PDF) copies of a site plan and exterior elevations of all existing and proposed structures, drawn to scale, showing:
  - A. Date, scale, and north arrow;
  - B. The site address;
  - C. The dimensions and square footage of the lot;
  - D. Existing and proposed structures and other improvements, including dimensions and square footage of structures where applicable;
  - E. The location of the entrance to the Accessory Dwelling Unit;
  - F. The location of additional parking for the Accessory Dwelling Unit; and
  - G. The following statement must be shown on the face of the site plan:
    - "The Accessory Dwelling Unit shown on this plan shall not be sold as a separate property or as a condominium, or in any way be part of a subdivision of the lot upon which it is located unless that subdivision conforms with all provisions of the Lynnwood Municipal Code."
- 3. A complete, notarized Affidavit of Ownership for all property owner(s) of the involved property, with original signatures.
- 4. Application fee(s).

| For Staff Use ONLY |        |
|--------------------|--------|
| Verified           | Waived |
|                    |        |
|                    |        |
|                    |        |
|                    |        |
|                    |        |

**FEES** See LMC 3.104 or contact our office for current fee information.

- NOTES**
1. The approval of an Accessory Dwelling Unit Application does not in any way replace, modify or waive any requirement for the compliance of the proposal with other applicable codes, standards, or regulations including, but not necessarily limited to, those of the Building, Fire or Public Works Departments. You are advised to contact these departments concerning such requirements.
  2. The approved permit, and any other forms required by the Community Development Department, shall be recorded by the property owner with Snohomish County to indicate the presence of the Accessory Dwelling Unit, the requirement of owner-occupancy, and any other standards or requirements for maintaining the unit as a separate dwelling unit.
  3. Any permit issued for an Accessory Dwelling Unit shall expire two years from the date of approval unless a building permit for the Accessory Dwelling Unit has been obtained. The Community Development Department Director may grant a single one-year extension to this time limit, provided a written request for an extension is received before expiration.
  4. Any permit issued for an Accessory Dwelling Unit shall be issued only to the property owner and shall be valid only so long as the permit holder owns the property in title or as a contract purchaser. Such a permit shall expire automatically upon any transfer of property ownership from the permit holder.
  5. It is the responsibility of the owners, applicants and agents to become aware of the requirements of Title 21-Zoning of the Lynnwood Municipal Code. It is strongly encouraged that a pre-application conference with the City staff be scheduled prior to submittal of an application.
  6. An approved ADU application only becomes a valid permit when it is recorded with the Snohomish County Auditor's Office, Recording Division, and a recording number is provided to the City. Requirements for recording, fees, and frequently asked questions are available online at the Snohomish County Recording webpage.
  7. An application may be amended only in writing.
  8. Submittal of this application grants the appropriate city officials the right of entry to the project site during a reasonable hour and, upon proper identification, to the building, structure and/or premise, which is directly related to this application.
  9. In each application the burden of proof rests with the applicant, petitioner or proponent.
  10. Items with any typewritten information must be 10-point font or larger to ensure legibility of scanned documents.

I/We \_\_\_\_\_, owner(s) of the property commonly known as \_\_\_\_\_, do hereby apply for approval of a Accessory Dwelling Unit for the above-referenced property. I/We certify that the information provided in this application, including all submittals and attachments, is true and correct to the best of my/our knowledge.

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Please print name: \_\_\_\_\_

