



ACCESSORY DWELLING UNIT

3726 E Campus Dr suite H, EAGLE MOUNTAIN, UT 84005 •

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PROPERTY INFORMATION

Property Address: _____ Parcel ID # _____

Zone: _____ Size of the residence (sq ft): _____

Size of the area used for the Accessory Apartment (sq ft): _____

CONTACT INFORMATION

Property Owner: _____

Address: _____

Phone: _____ Cell: _____ Fax: _____

E-mail: _____

****IMPORTANT:** Incomplete applications will not be accepted. In order for an application to be deemed complete, all required materials must be submitted with the application, regardless of whether they have been previously submitted to Eagle Mountain City. If any required materials are not applicable to your submittal, you must submit a letter for each required item stating the reason why it is not applicable to your application.**

SUBMITTAL REQUIREMENTS

- 1 physical copy of required materials found on checklist.
- 1 digital/electronic copy of all required materials on a jump drive or through Dropbox.

FOR OFFICE USE ONLY

Date: _____ Received By: _____ Application Complete? Yes No

Anything Missing: _____

Fee: \$230.00

Total Amount Paid: _____

APPLICANT CERTIFICATION: I certify under penalty of perjury that this application and all information submitted as part of this application are true, complete and accurate to the best of my knowledge. I also certify that I am the owner of the subject property and that the authorized agent noted in this application has my consent to represent me with respect to this application. Should any of the information or representations submitted in connection with this application be incorrect or untrue, I understand that Eagle Mountain City may rescind any approval, or take any other legal or appropriate action. I also acknowledge that I have reviewed the applicable sections of the Eagle Mountain Development Code and that items and checklists contained in this application are basic and minimum requirements only and that other requirements may be imposed that are unique to individual projects or uses. Additionally, I acknowledge that I have reviewed and understand the section from the Consolidated Fee Schedule and hereby agree to comply with this ordinance. I also agree to allow the Staff, Planning Commission, or City Council or appointed agent(s) of the City to enter the subject property to make any necessary inspections thereof.

Property Owner's Signature: _____ Date: _____

Attached Documents: Accessory Apartment Application Requirements/Checklist

ACCESSORY DWELLING UNIT APPLICATION REQUIREMENTS/CHECKLIST

An Accessory Dwelling Unit is defined as an independent habitable living unit, with a kitchen, bath facilities, and it's own entryway, which is: 1) within or attached to an owner-occupied single-family residential dwelling, or 2) within a separate detached accessory structure, or above a detached garage, on a single-family lot.

- NOTARIZED LETTER. A notarized letter of application (sworn before a notary public) shall be provided by the owners stating that such owners will occupy the said dwelling, except for the bonafide temporary absences.
- FLOOR PLAN. A floor plan of a quarter (.25) inch to the foot showing the floor in which the Accessory Apartment will be located.
- PARKING PLAN. A parking plan shall be submitted for Accessory Apartments that contains the following information: the number of tenants that will be residing in the Accessory Apartment, and the location and area of off-street parking areas.
- BUILDING PERMIT. A building permit must be included with accessory apartment application if basement is not finished.
- FEE. The processing fee of \$230.00 shall be paid in full.
- ADDRESSES. Two mailboxes with two separate addresses shall be provided. Accessory apartment address will be provided during approval process.
- ACKNOWLEDGEMENT. The applicant must read chapter *17.70 Accessory Apartment* of the city's Development Code and sign an acknowledgement that they have done so and understand the requirements.

Signature of Applicant: _____ Date: _____

Printed Name: _____