



City of Tigard

COMMUNITY DEVELOPMENT DEPARTMENT

Accessory Residential Unit – Type I Application

PROPOSAL SUMMARY

The owners of record of the subject property request an

Accessory Residential Unit as described:

Primary unit area: _____ square feet

Accessory Residential unit area: _____ square feet

* An accessory residential unit may not exceed 50 percent of the size of the primary unit, up to a maximum of 800 square feet.

Accessory Unit will be: Within primary An addition

Owner will occupy: Primary unit Accessory unit

Total number of off-street parking spaces (min. one for each unit): _____

Property address/location: _____

Tax map and tax lot #: _____

Comprehensive plan/zone designation: _____

Site size: _____

APPLICANT:

Name: _____

Address: _____

City/state: _____ Zip: _____

Phone: _____ Email: _____

PROPERTY OWNER/DEED HOLDER(S)* Same as Applicant

Name: _____

Address: _____

City/state: _____ Zip: _____

Phone: _____ Email: _____

* When the owner and the applicant are different people, the applicant must be the purchaser of record or a lessee in possession with written authorization from the owner or an agent of the owner. The owner(s) must sign this application in the space provided on the back of this form or submit a written authorization with this application.

REQUIRED SUBMITTAL ELEMENTS

- Owner's Signature/Written Authorization
- Title Transfer Instrument or Deed
- Site/Plot Plan (2 copies)
- Site/Plot Plan (reduced 8 1/2" x 11")
- Narrative (2 copies) address criteria in 18.710.020
- Application Fee

FOR STAFF USE ONLY

Case No. (s): _____

Related Case No. (s): _____

Application Fee: _____

Application Accepted:

By: _____ Date: _____

Application Determined Complete:

By: _____ Date: _____

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THE APPLICANT(S) SHALL CERTIFY THAT:

- The above request does not violate any deed restrictions that may be attached to or imposed upon the subject property.
- If the application is granted, the applicant will exercise the rights granted in accordance with the terms and subject to all the conditions and limitations of the approval.
- All of the above statements and the statements in the plot plan, attachments, and exhibits transmitted herewith, are true; and the applicants so acknowledge that any permit issued, based on this application, may be revoked if it is found that any such statements are false.
- The applicant has read the entire contents of the application, including the policies and criteria, and understands the requirements for approving or denying the application.

SIGNATURES of applicant and each owner of the subject property required.

_____ Applicant's signature	_____ Print name	_____ Date
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_____ Owner's signature	_____ Print name	_____ Date
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_____ Owner's signature	_____ Print name	_____ Date
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_____ Owner's signature	_____ Print name	_____ Date
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_____ Owner's signature	_____ Print name	_____ Date
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