



ACCESSORY DWELLING UNIT COMMUNITY DEVELOPMENT

806 WEST MAIN STREET • MONROE, WA 98272
City Hall 360.794.7400 • Fax 360.794.4007

INSTRUCTIONS:

Below is a checklist of items that must be submitted as part of your application for an accessory dwelling unit. Requirements below outline the minimum information that must be provided as part of the application. Numbers in parenthesis equal the number of copies required. Please use only paper clips and/or binder clips when assembling documents.

If you have any questions about what is required, or if you would like to schedule a pre-application meeting, please call the Community Development Department at 360.863.4532.

SUBMITTAL CHECKLIST

- ◇ (1) CD with Individual PDFs of Each Item Listed Below ↓
- ◇ (1) Original, Plus (4) copies of the Combined Permit Application Form
- ◇ (1) Vicinity Map (on 8½" X 11")
- ◇ (2) Written Narrative (description of proposal)
- ◇ (1) Original, Plus (2) copies of a covenant as required and outlined in MMC18.40.20
- ◇ (1) Original affidavit, signed by property owner before a notary public, affirming that the owner occupies either the primary residence or the accessory dwelling unit for more than six months a year
- ◇ (1) Title Report dated within 30 days of submittal
- ◇ (2) Public Notice Materials

SITE PLANS

- ◇ (1) Original (wet-stamped) plus (2) full size copies
- ◇ (2) 11" X 17"
- ◇ (2) 8½" X 11"



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SITE PLAN REQUIREMENTS

Cover Sheet

- ◇ Title Block (centered at top of sheet) that includes the following:
 - ◆ City of Monroe
 - ◆ Name of proposed development
 - ◆ File No. (call 360.863.4532 for correct number)
 - ◆ Section, township, & range
 - ◆ Site Street Address (use block # if no bldg. #)
- ◇ Site Information
 - ◆ Zoning designation
 - ◆ Comprehensive plan designation
 - ◆ Use classification (MMC 18.10.050 Table)
 - ◆ Bulk Development Requirement Calculations
 - Lot(s) Size (both acreage and square footage)
 - Lot Dimensions (length, width) and Numbers/Letters.
 - Building Setback (for existing, proposed, and relocated buildings on site.)
 - Total Lot Coverage (Impervious Surface)
 - Size of Each Lot (both in acreage and square feet)
 - ◆ Adjacent Street Names & Classifications
 - ◆ Required Parking Space Calculations (required & proposed)
 - ◆ Utility Provider (Sewer & Water)
 - ◆ Critical Area Types Located On-Site (If Applicable)
 - ◆ Shoreline Classification (If Applicable)
 - ◆ Code Summary Per IBC 107.2.1
 - ◆ Deferred Submittal Summary Per IBC 107.3.3
 - ◆ Sheet Index Per IBC 107.2.1
 - ◆ Structural calculations and plans signed and stamped by Engineer Per IBC 107.1
 - ◆ Type of Construction Per IBC 107.2.1 and 602
 - ◆ Occupancy Group Classification Per IBC Chapter 3
 - ◆ Allowable building Area Calculations Per IBC 503 and 506
 - ◆ Height and Number of Stories Per IBC 504 and 506

Site Plan Sheet

- ◇ Title Bar (locate at bottom or along right edge of sheet) That Includes the Following:
 - ◆ Date drawing was prepared or revised
 - ◆ Project name & location
 - ◆ Name, address, & phone number of applicant, owner, Engineer & Surveyor



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- ◆ North arrow, graphic scale (1"=50' or larger), & legend
- ◆ Legal description of property
- ◆ Boundaries of the property to be developed
- ◆ Airport compatibility zone (if applicable)
- ◆ The existing zoning district of the proposed development site and any other zoning district within three hundred feet of the site.
- ◆ The proposed number of square feet in paved or covered surfaces, whether covered by buildings, driveways, parking lots or any other structure covering land. This includes crushed rock and gravel.
- ◆ Existing lot lines within or adjacent to the project site
- ◆ Existing and proposed right-of-ways (include dimensions & street name)
- ◆ Existing and proposed easements (include dimensions), including utility easements (water, sewer, storm, gas, electric, etc)
- ◆ Storm water drainage systems for existing utility structures and lines including the location and extent of curbs and gutters
- ◆ Storm water drainage systems for proposed utility structures and lines including the location and extent of curbs and gutters
- ◆ Existing critical area boundaries and associated buffers on-site and within 150ft. of site (if applicable)
- ◆ Building setbacks (whether proposed, expanded, retained, or relocated) from all lot lines
- ◆ Site ingress/egress (existing and/or proposed)
- ◆ Show all buildings (whether existing, proposed, expanded, retained, or relocated) dimensions and square footage
- ◆ Show distances between all buildings (whether existing, proposed, expanded, retained, or relocated)
- ◆ Separated uses or non-separated uses
- ◆ Exterior elevations
- ◆ The total number of square feet in gross area for both the primary residence and the Accessory Dwelling Unit
- ◆ Describe any existing non-conforming **uses**
- ◆ Describe any existing non-conforming **structures**
- ◆ Location of all **existing** structures, including but not limited to fences, culverts, bridges, roads and streets
- ◆ Location of all **proposed** structures, including but not limited to fences, culverts, bridges, roads and streets
- ◆ Show location of all existing and/or proposed fire-hydrants
- ◆ Number of parking spaces and location on plans
- ◆ All means of vehicular ingress and egress to and from site, include location and extent of curbs and gutters



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- ◆ Topographic map(s) which delineate contours, both existing and proposed at intervals of two feet. Show existing lakes, streams and forested areas.
- ◆ Location and widths of roadways and drive aisles.

Design Review

- ◇ Design Review is required if the project is located within the Downtown Plan Area as listed below:
 - ◆ Borlin Park Neighborhood or Historic Main
 - ◆ Administrative Review, or
 - ◆ Consultant Review



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APPLICANT INFORMATION

Accessory Dwelling Units (MMC18.40)

The primary purpose of an Accessory Dwelling Unit (ADU) is to permit the establishment of additional living quarters within the single-family residential neighborhood in order to: 1) make it possible for adult children to provide care and support to a parent or other relative in need of assistance; 2) provide increased security and companionship for homeowners; 3) provide the opportunity for homeowners to gain the extra income necessary to help meet the rising costs of homeownership; or 4) provide for the care of disabled persons within their own homes.

Pre-Development Review Meeting

The City strongly encourages a Pre-Development Review meeting before submittal of a land development, subdivision, or commercial building application. This will provide you an opportunity, early in the planning stage, to meet with Development Review representatives who will assist you with preliminary direction regarding your proposed project.

Pre-Development meetings are held every Tuesday beginning at 1:30 p.m. and are limited to 45-minute sessions. Contact the Community Development Department at 360.863.4532 to schedule a meeting following preparation of your Pre-Development submittal, and with any questions regarding this form.

Criteria for approval

When reviewing an application for an ADU, the following factors will be considered:

1. Number of Units. A single-family dwelling may have only one ADU per lot.
2. Size. The size of the ADU shall be no larger than 40 percent of the prime structure or more than 800 square feet and meet the requirements of MMC 18.40.030(C).
3. Location and appearance. The single-family appearance and character of the residence shall be maintained when viewed from the surrounding neighborhood and shall meet the criteria described in MMC 18.40.030(D).
4. Parking. One additional parking stall is required for the ADU, requiring a total of three (3) off-street parking stalls for the site MMC 18.40.030(E).
5. Occupancy. Either the primary residence or the ADU shall be owner-occupied per MMC 18.40.030(F)
6. Safety, Light, Ventilation, Floor Area, and Similar Factors. ADUs shall comply with all applicable requirements of the Building Code adopted by Chapter 15.04 MMC.

Final Action

Upon final approval, the applicant must submit an original signed covenant for city review. Once the city approves the covenant, the applicant will take the covenant to the Snohomish County Auditor's Office for recording. After recording, the applicant must return a certified copy containing the Auditor's File Number to the Community Development Department. The Snohomish County Auditor's phone number is (425) 388-3483.



**Community Development
Building Division**

806 West Main Street, Monroe, WA 98272
 Phone (360) 794-7400 Fax (360) 794-4007
www.monroewa.gov

FOR OFFICE USE ONLY
PERMIT #(s) _____

COMBINED PERMIT APPLICATION

PERMIT SUBMITTAL HOURS

**MONDAY – FRIDAY
8:00 – 12:00 / 1:00 – 5:00**

Building	Operations	Fire	Land Use
<input type="checkbox"/> Commercial T/I	<input type="checkbox"/> Engineering Review	<input type="checkbox"/> Fire Alarm	<input type="checkbox"/> Accessory Dwelling Unit
<input type="checkbox"/> Demolition	<input type="checkbox"/> Fencing	<input type="checkbox"/> Fire Sprinkler	<input type="checkbox"/> Boundary Line Adjustment /Lot Consolidation
<input type="checkbox"/> Garage/Carport	<input type="checkbox"/> Grading	<input type="checkbox"/> High Piled Storage	<input type="checkbox"/> Conditional/Special Use
<input type="checkbox"/> Mechanical	<input type="checkbox"/> Retaining wall	<input type="checkbox"/> Hood Suppression	<input type="checkbox"/> Land Clearing/Forest Practices
<input type="checkbox"/> New Construction (Commercial/Residential)	<input type="checkbox"/> Rockery	<input type="checkbox"/> Operational	<input type="checkbox"/> Planned Residential Development
<input type="checkbox"/> Plumbing	<input type="checkbox"/> Right-of-Way Disturbance	<input type="checkbox"/> Spray Booth	<input type="checkbox"/> Shoreline Permit
<input type="checkbox"/> Racking	<input type="checkbox"/> Special Flood Hazard Area	<input type="checkbox"/> Tents & Canopies	<input type="checkbox"/> Short Plat
<input type="checkbox"/> Residential Remodel	<input type="checkbox"/> Utility Service	<input type="checkbox"/> Other _____	<input type="checkbox"/> Subdivision/Plat
<input type="checkbox"/> Sign	<input type="checkbox"/> Other _____		<input type="checkbox"/> Variance
<input type="checkbox"/> Other _____			<input type="checkbox"/> Other _____

NOTE: All required Electrical Permits will be issued by the Dept. of Labor & Industries.

THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT COMPLETED SUBMITTAL REQUIREMENTS

Site Address or Property Location: _____

Size of site (acre/square feet): _____

Assessor's Tax Parcel Number (14 digits): _____

Applicant: _____ Phone # (____) _____

*Signature: _____ Printed Name: _____

Mailing Address: _____ Fax # (____) _____

City _____ State _____ Zip _____ E-mail _____

Property Owner: _____ Phone # (____) _____

**Signature: _____ Printed Name: _____

Mailing Address: _____ Fax # (____) _____

City _____ State _____ Zip _____ E-mail _____

Attach a separate sheet for additional property owners/additional addresses

*Applicant: By your signature above, you hereby certify that the information submitted is true and correct and that you are authorized by the property owner(s) to act on their behalf. **Property Owner(s): By your signature above, you hereby certify that you have authorized the above Applicant to make application on your behalf for this application.

Combined Permit Application - Page 2

Contractor: _____ Phone # _____

Contractor's License # _____ Fax # _____

Exp Date _____ Mailing Address _____

Contractor's Bond Company: _____

Contractor's Bid Amount or Project Cost (labor and materials): \$ _____

Forest Tax Reporting Account Number (if harvesting timber call the Department of Revenue at (800) 548-8829 for tax reporting information or to receive a tax number): _____

Detailed description of proposal/work:

Lending Institution for project (if applicable): _____

FOR OFFICE USE ONLY

Residential:

Living area: _____ sf x \$ _____ = \$ _____

Garage / Carport: _____ sf x \$ _____ = \$ _____

Deck / Porch: _____ sf x \$ _____ = \$ _____

Total valuation: \$ _____

Commercial:

(fill in type) _____ sf x \$ _____ = \$ _____

(fill in type) _____ sf x \$ _____ = \$ _____

Total valuation: \$ _____

Plan Check Fee: _____ Permit Fee: _____

State Fee: _____ Fire Plan Check Fee: _____

Technology Fee: _____ SEPA Fee: _____

Land Use:

Planning Application Fee: _____ Publication Fee: _____

Fire Plan Check Fee: _____ Mailing Fee: _____

SEPA Fee: _____ Technology Fee: _____

TOTAL FEES: _____



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AFFIDAVIT

STATE OF WASHINGTON)

)

COUNTY OF SNOHOMISH) _____

Application Name and Number

I, _____, being first duly sworn on oath
depose and say that I affirm I am the property owner for tax parcel

located at _____ Monroe, Washington and occupy
the primary residence or the accessory dwelling unit for more than six (6) months of the
year.

Signed

Subscribed and sworn to me this _____ day _____, 20____

NOTARY SEAL _____

Signature

NOTARY PUBLIC in and for the State of
Washington:

Residing at: _____

Printed Name: _____

My commission expires: _____

