



# ACCESSORY DWELLING UNIT

<b>Application Number</b>
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Community & Economic Development | 2277 E. Bengal Blvd. | 801-944-7000 | [www.ch.utah.gov](http://www.ch.utah.gov)

<b>Property Address</b>	
<b>Brief Project Description</b>	
<b>Property Owner (Name and Company)</b>	
<b>Property Owner Mailing Address</b>	
<b>Property Owner Phone</b>	
<b>Property Owner Email</b>	
<b>Applicant (Name and Company)</b>	
<b>Applicant Mailing Address</b>	
<b>Applicant Phone</b>	
<b>Applicant Email</b>	
<b>Application Date</b>	
<b>Applicant Signature</b>	
<b>Project Zoning (Office Use Only)</b>	
<b>Fee Paid (Office Use Only)</b>	

This application coversheet and all required attachments from the following checklist should be **submitted in digital format** to the Community and Economic Development Department at [planning@ch.utah.gov](mailto:planning@ch.utah.gov).

Please note that all items will be required at the time of formal submittal, unless otherwise specified by staff. Staff reserves the right to request additional materials as deemed necessary. A complete application and materials must be submitted by the month prior's public meeting date, in order to be eligible for the upcoming meeting agenda. Please contact staff at [planning@ch.utah.gov](mailto:planning@ch.utah.gov) with questions about these dates. Submitting an application by this date does not guarantee scheduling for the upcoming meeting, as additional information or extended staff review may be necessary.

## GENERAL

- Application Coversheet (Page 1)
- Project Narrative (Page 3)
- Signed Consent Form (Page 4)
  - Only required if applicant is different than property owner
- Complete Home Business License Application (Page 5)
- Notarized Affidavit of Permanent Residency (Page 7)

## PLAN SUBMITTAL REQUIREMENTS

- Floorplan of Proposed ADU Area
- ADU Parking and Access Plan
  - Required Tenant Parking
  - Tenant Access to ADU
- For Detached ADUs Only:** Scaled Site Plan
  - Proposed ADU Location with Setback Measurements
  - Required Fencing
  - Landscaping

*Please note that building plan and permit requirements will be determined by city staff after initial application review is complete. For ADUs requiring construction, a will-serve letter will be required from water and sewer providers. The above list is the minimum requirements for initial application review.*

## OTHER REQUIRED ITEMS INCLUDE:

***The above text box is reserved for office use only, for staff to indicate any additional items that are required for this project.***

## PROJECT NARRATIVE

Your narrative will be considered an integral part of your application and should provide a comprehensive overview of your project, including, but not limited to the following elements. **Please note that staff reserves the right to deem any application lacking appropriate narrative detail as incomplete. You can provide this narrative in the space below, or as a separate document.**

- Describe the proposed ADU space, including whether it is an internal ADU or a detached ADU, the total square footage, number of bedrooms, access to the ADU, and where tenants will park.
- Summarize the construction for the proposed ADU space. If the proposed ADU utilizes existing construction, please describe what has been constructed.

# OWNER'S CONSENT FORM

I/we, the Undersigned, do hereby grant permission to:

\_\_\_\_\_

To act on my/our behalf for the purpose of the following application:

\_\_\_\_\_

Owner(s): \_\_\_\_\_

Address(es): \_\_\_\_\_

\_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

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

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

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

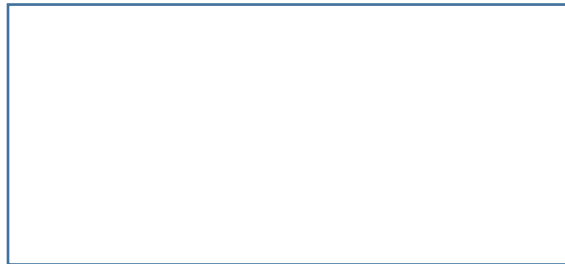
State of UTAH

County Of: \_\_\_\_\_ } ss.

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ before me, the undersigned Notary Public, personally appeared \_\_\_\_\_, personally known to me, or whose identity I verified on the basis of their \_\_\_\_\_, or on the oath of \_\_\_\_\_, a credible witness whose identity I verified on the basis of their \_\_\_\_\_, to be the person(s) whose name(s) is/are subscribed to in this instrument and acknowledged that they executed the same.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Notary Commission Expiry Date



# Business License Application



**COTTONWOOD HEIGHTS**  
**: BUSINESS LICENSE APPLICATION**  
 2277 E Bengal Boulevard  
 Cottonwood Heights, UT 84121  
 p.801.944.7067 f.801.944.7007  
 businesslicense@ch.utah.gov

\*\*\*\*\* OFFICIAL USE ONLY \*\*\*\*\*

License Number \_\_\_\_\_

New Application  
 Change of Owner/Location  
 Other \_\_\_\_\_

<p style="text-align: center;">Home/Residential      Commercial      Temporary</p> <p>Ownership:    Sole Proprietor    Partnership    LLC    Corporation</p> <p><small>*LLC, Corporations &amp; Partnerships must provide a current list of Corporate Officers, Partners, Members, Directors &amp; Registered Agents.</small></p>	<p>Federal Tax ID# _____</p> <p>Utah Sales Tax # _____</p> <p>State License # &amp; Type (if Applicable) _____</p>
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Business Name _____	Business Phone # _____	# of Employees _____
Business Address (Physical, NO PO Box) _____	Business WEBSITE Address _____	
Mailing Address (other than the Physical location) _____	Business E-mail Address _____	

Description of Business Activities _____	Home Office Only? YES    NO	Will Clients/employees visit your home? YES    NO	Will you have more than 2 daily deliveries to your home? YES    NO
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Emergency Contact _____	Phone _____	Cottonwood Heights Business Association membership is free with your business license. Add your business to the member list? Yes    No
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Enter Below the names of Owners, Partners, or Corporate Officers and a Local Manager							
Name _____	Title _____	Name _____	Title _____				
Home Address _____	Home Address _____						
City _____	State _____	Zip _____	City _____	State _____	Zip _____		
Home Phone _____	Date of Birth _____		Home Phone _____	Date of Birth _____			
Drivers License # _____	Personal E-mail Address _____		Personal E-mail Address _____	_____			

	Fee Amount
Commercial _____	\$ _____
Home _____	_____
Home Office Only _____	No Fee Required
Other _____	_____
	Total Fees \$ _____
Call 801-944-7067 for payment.	

\*\*\*\*\* OFFICIAL USE ONLY \*\*\*\*\*

Approvals \_\_\_\_\_

Zoning \_\_\_\_\_

Code Enforcement \_\_\_\_\_

Fire \_\_\_\_\_

Police \_\_\_\_\_

Health \_\_\_\_\_

The foregoing information is correct to the best of my knowledge. I am aware that this application does not authorize conducting business until approved by Cottonwood Heights and a license has been issued. I also agree to conduct said business strictly in accordance with the laws and ordinances covering such business, and that no other type of business will be conducted other than what has been state above. It is the responsibility of the licensee to renew the license, failure to receive notice does not excuse this responsibility.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_



# HOME BUSINESS SELF FIRE INSPECTION FORM

This form is to be completed by the applicant.

All of the information contained in this report is considered applicable unless otherwise specified.

Any questions please contact the UNIFIED FIRE AUTHORITY Cottonwood Heights Area Inspector at 743-7270

**Circle the most applicable answer to all questions:**

Business Name : \_\_\_\_\_ Business Phone: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Date of Inspection: \_\_\_\_\_

<u>AREA OF INSPECTION</u>	<u>WHAT TO INSPECT</u> <u>Unless otherwise stated if the answer to any question is "NO" a Fire Department Inspection MAY be required.</u>	<u>DOES THE AREA/ITEM COMPLY</u>
1. <u>Address</u>	Shall be a minimum of 4" in height and visible from street (free from bushes, shrubs, etc.)	<u>N/A</u> <u>YES</u> <u>NO</u>
2. <u>Exits/ Hallways</u>	All exit doors SHALL remain clear and free of ALL obstructions; (Boxes, storage, deliveries, etc.)	<u>N/A</u> <u>YES</u> <u>NO</u>
3. <u>Fire Extinguishers</u>	At least one 5lbs Commercial "2A10BC" serviceable (metal head and neck) extinguisher. Permanently mounted in common area of home/business. Required to have an annual inspection by a certified technician.	<u>N/A</u> <u>YES</u> <u>NO</u>
4. <u>Storage</u>	Shall be no storage under stairways. Shall maintain 36" clearance around all electrical panels. Shall have no storage around furnace, water heater or any fuel-fired appliances.	<u>N/A</u> <u>YES</u> <u>NO</u>
5. <u>Misc. Storage</u>	Are you storing any flammable or combustible liquids? Are you storing any hazardous materials? (If answer to either of these questions is yes a fire department inspection Shall be required)	<u>N/A</u> <u>YES</u> <u>NO</u>
6. <u>Electrical</u>	Shall not use any extension cords as permanent wiring (exceeding 3 days). Any open slots in an electrical panel shall have approved cover placed in open slot (Never tape across breakers). All light switches and outlets shall have approved covers. Shall not have surge protectors plugged into another surge protector or extension cord.	<u>N/A</u> <u>YES</u> <u>NO</u>
7. <u>Smoke/CO Detectors</u>	Shall have one every level. Shall be tested monthly and batteries changed twice a year.	<u>N/A</u> <u>YES</u> <u>NO</u>
8. <u>Space Heaters</u>	Shall be UL Listed and Shall be kept clear off all combustibles.	<u>N/A</u> <u>YES</u> <u>NO</u>
9. <u>Residential Fire Sprinkler System</u>	If your home has a residential fire sprinkler system, does it have a current inspection tag? (If the answer to this question is NO a fire department inspection is required.)	<u>N/A</u> <u>YES</u> <u>NO</u>

I hereby certify that the information is true and correct to the best of my knowledge.

Business/Home Owner \_\_\_\_\_ Signature \_\_\_\_\_  
Print Name Date

**After Recording, Return To:**

COTTONWOOD HEIGHTS  
Attn. Community Development Director  
2277 E. Bengal Blvd.  
Cottonwood Heights, UT 84121

**Owner's Accessory Dwelling Unit Affidavit**

STATE OF \_\_\_\_\_ )  
 )ss:  
COUNTY OF \_\_\_\_\_ )

**THIS OWNER'S ACCESSORY DWELLING UNIT AFFIDAVIT** (this "*Affidavit*") is made effective \_\_ \_\_\_\_\_ 20\_\_ by the undersigned owner(s) (collectively, "*Owner*") of the Property (defined below), in favor of the city of **COTTONWOOD HEIGHTS**, a Utah municipality whose address is 2277 East Bengal Boulevard, Cottonwood Heights, UT 84121 and its successors and assigns ("*City*").

Being first duly sworn, Owner deposes and says:

1. I am aware that City's code of ordinances (the "*Code*") prohibits the construction or use of a second dwelling unit (sometimes called an "accessory dwelling unit") (each, an "*ADU*") within any residence or on any property located in a City single-family zone (such as City's F-1, RR-1 and R-1 zones) except pursuant to Code Chapter 19.75 (Chapter "*19.75*").

2. I am the record owner of the realty (the "*Property*") that is described on the attached exhibit (the "*Exhibit*"). The Exhibit also includes a description of the primary dwelling unit (i.e., the primary residence) on the Property.

3. I desire to maintain an ADU on the Property (either within the primary residence on the Property, called an "*internal ADU*," or in an accessory building on the Property, called an "*external ADU*") as detailed in an application for an ADU permit (the "*Permit*") that I have filed with City as provided in Chapter 19.75. The proposed ADU also is described on the Exhibit.

4. I acknowledge and agree that the ADU on the Property may only be used in accordance with the Code and City's other land use regulations.

5. I further acknowledge and agree that the Permit is not transferrable to a subsequent record owner of the Property, but instead that continued use of the ADU on the Property shall require an updated Permit, site inspection (if applicable), an affidavit to supersede this Affidavit, and such other actions as may be required by the then Code.

6. I give this Affidavit as required by Code section 19.75.060 to induce City to issue the Permit as I have requested. I acknowledge that City will rely on this Affidavit as being complete and truthful in its decision to issue the Permit.

**DATED** effective the day and year first above written.



**OWNER:**

\_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Subscribed and sworn to before me this \_\_\_ day of \_\_\_\_\_ 20\_\_ by  
\_\_\_\_\_ and \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

# Exhibit to Affidavit

**ADDRESS OF PROPERTY:** \_\_\_\_\_, Cottonwood Heights, Utah

**PROPERTY'S TAX PARCEL NUMBER(S):** \_\_\_\_\_

**LEGAL DESCRIPTION OF PROPERTY:** (Attach or insert below Property's legal description)

**DESCRIPTION OF PRIMARY DWELLING UNIT:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_.

**DESCRIPTION OF PROPOSED ADU:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_.