



# ACCESSORY DWELLING UNIT RESIDENTIAL ZONING VERIFICATION

Community and Economic Development

City of Arlington • 18204 59th Ave NE • Arlington, WA 98223 • Phone (360) 403-3551

(Please allow 72 hours for review)

<b>Type of Permit:</b>	<input type="checkbox"/> Single-family	<input type="checkbox"/> Duplex	<input type="checkbox"/> Townhouse	<input type="checkbox"/> Addition	<input type="checkbox"/> Accessory Structure
Property Address: _____		Project Valuation: _____			
Lot #: _____ Parcel ID No.: _____		Preferred Contact: <input type="checkbox"/> Owner <input type="checkbox"/> Contractor			
Project Description: _____					
Owner Name: _____		Home No.: _____			
Email Address: _____		Cell No.: _____			
Mailing Address: _____		City: _____		State: _____ Zip: _____	
Contractor Name: _____		Office No.: _____			
Email Address: _____		Cell No.: _____			

SF = Square Foot

1. Proposed Building Dimensions: W: _____ L: _____ H: _____ Total SF: _____
2. Allowed Lot Coverage: Total Lot Size: _____ SF x 35% = _____ SF <i>Lot Size can be found on the Plat Map or Snohomish County Assessor Property Information</i>
3. SF of all Structures: _____ ÷ Total Lot Size _____ = _____ % <i>This square footage includes the footprint area of all structures on the property including house, garages, sheds, covered patios, and decks permitted by the building code.</i>
4. Septic Tank on Property? <input type="checkbox"/> Yes <input type="checkbox"/> No Private Well on Property? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If so, please provide Snohomish County Health Department approval and indicate on site plan.</i>
5. Are there trees greater than 12" diameter to be removed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate on site plan.
6. Permanent connections to water service may require Cross Connection Control. Check all that apply. <input type="checkbox"/> Fire Sprinkler System <input type="checkbox"/> Lawn Sprinkler System <input type="checkbox"/> Decorative Pond/Fountain <input type="checkbox"/> Re-circulating Heating System <input type="checkbox"/> Medical Equipment <input type="checkbox"/> Hot Tub <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Livestock Drinking Tanks <input type="checkbox"/> Other: _____

Applicant Signature: \_\_\_\_\_

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

Date: \_\_\_\_\_



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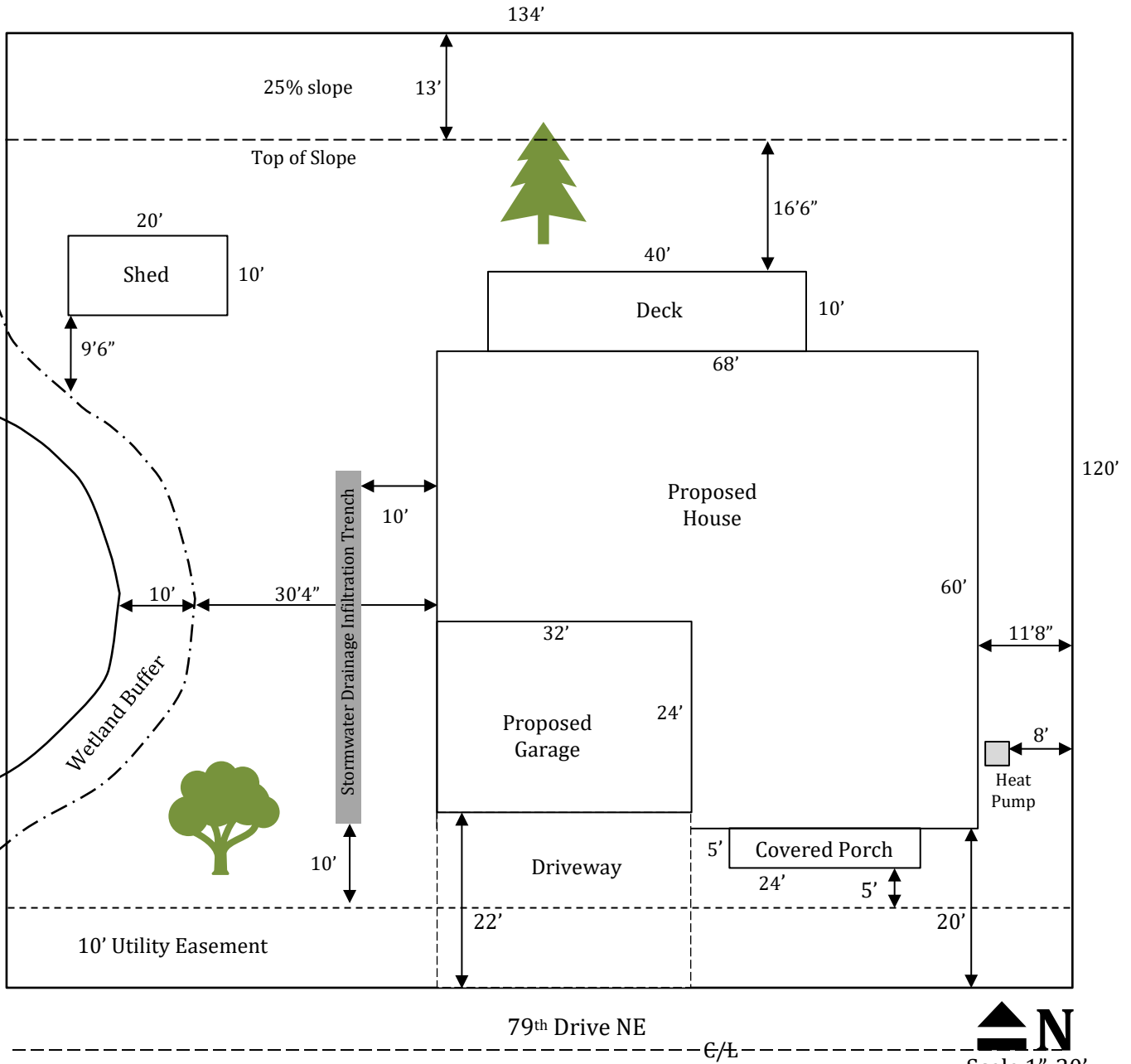
<b>Required Submittals:</b>	<input type="checkbox"/> Accessory Dwelling Unit Zoning Verification Application	<input type="checkbox"/> Detailed Site Plan
Location of Accessory Dwelling Unit:	<input type="checkbox"/> Attached (within existing primary residence) <input type="checkbox"/> Detached (separate from existing primary residence) <input type="checkbox"/> Located in Attached Garage <input type="checkbox"/> Located in Detached Garage	
<b>AMC 20.44.040 – Accessory Dwelling Unit (ADU) Requirements</b>		
(a) Only one ADU per residence is allowed.		
Are there any existing ADU's located on the property? <input type="checkbox"/> Yes <input type="checkbox"/> No		
(b) The ADU may not comprise more than 25 percent of the gross floor area of the primary residence or more than a total of 800 square feet, whichever is lesser, nor be less than 300 square feet.		
Square Footage of Existing Residence _____ (Total Square Footage x 25%) _____		
More than 300 Square Feet? <input type="checkbox"/> Yes <input type="checkbox"/> No      Less than 800 Square Feet? <input type="checkbox"/> Yes <input type="checkbox"/> No		
(c) The primary entrance to the ADU shall be subordinated to the main home entry and located in such a manner as to be unobtrusive from the street.		
Where is the primary entrance to the ADU located? _____		
(d) Any additions should be consistent with the architectural character of the home. Materials, roof forms, and window proportions should match that of the existing building.		
An elevation of the existing house and proposed ADU have been provided? <input type="checkbox"/> Yes <input type="checkbox"/> No		
A material list of the existing house and proposed ADU have been provided? <input type="checkbox"/> Yes <input type="checkbox"/> No		
(e) Any major exterior additions or alteration should be located to the rear of the home. Any necessary fire egress stairs shall be located so that they are not visible from the street.		
Location of ADU on the property? _____		
Fire Egress Stair Required? <input type="checkbox"/> Yes <input type="checkbox"/> No      If Yes, Location of Fire Egress Stairs _____		
(f) The required off-street parking shall be located to avoid negative impacts to neighbors and community character. Where is the Off-Street Parking Located?		
1-Bedroom Unit? <input type="checkbox"/> Yes <input type="checkbox"/> No      1 Space Provided? <input type="checkbox"/> Yes <input type="checkbox"/> No		
2-Bedroom Unit? <input type="checkbox"/> Yes <input type="checkbox"/> No      2 Spaces Provided? <input type="checkbox"/> Yes <input type="checkbox"/> No		



# RESIDENTIAL SITE PLAN EXAMPLE

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*This is a site plan example and does not reflect the requirements of a specific parcel.*



House 3312 Garage 768 Deck 400 Porch 120 Shed 200 <hr/> Total 4800	<b>Total Lot Size: .37 acres</b> Calculate acres to square feet: $.37 \times 43,560 = 16,117.20$ square feet <hr/> <b>Calculate Lot Coverage:</b> $16,117.20 \times .35 = 5,641.02$ square feet (this is the maximum allowed)
1 tree behind the residence 1 tree in the front of the residence	<b>Square Footage of all existing and proposed structures shall not exceed 35%:</b> $4,800 \div 16,117.20 = 30\%$ Lot Coverage