

City of Hollister Community Development Department

339 Fifth Street, Hollister CA (831) 636-4360 planning@hollister.ca.gov

For Department Use Only
Date Received:

Application No.

JUNIOR ACCESSORY DWELLING UNIT APPLICATION

APPLICANT AND PROPERTY OWNER INFORMATION								
Applicant Name	-		-					
Mailing Address								
City			State	7	ZIP			
Email			I I	ı	Phone			
Property Owner Name(s)				l	l			
Property Owner Phone	Property Owner Email							
PROPERTY INFORMATION								
Site Address								
Assessor Parcel Number (AP	N)							
Zoning District		Gener	ral Plan Designation					
Size of Lot (SF)	Size of Main Unit (S			SF)				
Is the property located in any of the following?								
Alquist-Priolo Seismic Zone	□ No □ Yes							
Flood Hazard Zone	□ No □ Yes	If y	yes, Zone(s):					
Historic District	ric District							
JUNIOR ACCESSORY DWELLING UNIT INFORMATION								
Existing Lot Coverage (%):	Propo	posed Lot Coverage (%):						
JADU Size (SF):			Size of addition, if applicable (SF):					
Max 500 SF		to 150 SF for ingress and egress only						
of Existing Parking Spaces: # of Parking Spaces Proposed: Not Required for a MADA but may be proposed.								
1			Required for a JADU but may be proposed Bedroom 2 Bedrooms 3 Bedrooms					
Proposed Rent The City of Hollister is interested in understanding the rental market for newly developed ADUs. Providing information on the proposed rent for your new JADU, even if tentative, helps us to understand affordability levels of these new units and how JADUs aid in meeting our affordable housing goals. You may input your proposed rent or rent range or select one of the ranges below based on the number of bedrooms of your unit. Please note that providing tentative rental information has no effect on the processing of your application, and you will have no obligation toward any information you provide. We greatly								
appreciate if you are able to provide an estimation.								
· · · · · · · · · · · · · · · · · · ·	/month Max. \$		/month					
Studio Monthly Rent	y Rent \$737-\$1,226 \$1,227-1,472			1-Bedroom Monthly Rent \$0-\$841 \$842-\$1,401 \$1,402-1,682				
\$0-\$736 \$737-\$	1	472	¢∩_¢Ω//1		¢ <u>2/1</u> 2_¢1	<i>∆</i> ∩1 ¢1	⊿ ∩ว₌1 ६೪२	

APPLICANT'S SIGNATURE & AFFIDAVIT

As part of this application the applicant hereby agrees to defend, indemnify and hold harmless the City of Hollister, its Council, boards and commission, officers, employees, volunteers and agents from any claim, action, or proceeding against the City of Hollister, its Council, boards and commission, officers, employees, volunteers and agents, to attack, set aside, void or annul an approval of the application or related decision, including environmental documents, or to challenge a denial of the application or related decisions. The applicant's duty to defend, indemnify and hold harmless shall be subject to the City promptly notifying the applicant of said claim, action or proceeding and the City's cooperation in the applicant's defense of said claims, actions or proceedings. The City of Hollister shall have the right to appear and defend its interest in any action through the City Attorney or outside counsel. The applicant shall not be required to reimburse the City for attorney's fees incurred by the City Attorney or its outside counsel if the City chooses to appear and defend itself in the litigation.

By Signing Below, I hereby certify that the application I am submitting, including all additional required information, is complete and accurate to the best of my knowledge. I understand that any misstatement or omission of the requested information or of any information subsequently requested may be grounds for rejecting the application, deeming the application incomplete, denying the application, suspending or revoking a permit issued on the basis of these or subsequent representations, or for the seeking of such other and further relief as may seem property by the City of Hollister.

the City of Hollister.					
Applicant Signature:	Date:				
DROPERTY OWNER SIG	SNATURE & AFFIDAVIT				
By signing below, I hereby certify under penalty of perjury, that I am the owner of record of the property described herein and that I consent to the action requested herein. All other owners, lenders or other affected parties on the title to the property have been notified of the filing of this application. Further, I hereby authorize City of Hollister employees and officers to enter upon the subject property, as necessary to inspect the premises and process this application.					
In order to facilitate the public review process, the City requires that property owners agree to allow any plans or drawings submitted as part of the application to be copied for members of the public. Property owner(s) hereby agree to allow the City to copy the plans or drawings for the limited purpose of facilitating the public review process.					
Property Owner Initials I understand that owner-occupancy is required for properties with a Junior Accessory Dwelling Unit. I hereby certify that I, as the property owner, intend to occupy either the primary dwelling, this JADU, or another existing accessory dwelling on the subject property.					
Property Owner Signature:	Date:				
ARCHITECT / DESIGNER / ENGINEER SIGNATURE					
In order to facilitate the public review process, the City requires that architects and engineers agree to allow any plans or drawings submitted as part of the application to be copied for members of the public. Architect/Engineer hereby agrees to allow the City to copy the plans or drawings for the limited purpose of facilitating the public review process.					
Signature:	Date:				
Name:	Relation to Project/Title:				
Signature:	Date:				
Name:	Relation to Project/Title:				