



# CITY OF LOS ALAMITOS

## ACCESSORY DWELLING UNIT (ADU) APPLICATION

Development Services Department  
3191 Katella Ave., Los Alamitos, CA 90720-5600  
Phone: (562) 431-3538 Fax: (562) 493-0678

**FOR OFFICE USE ONLY**  
Filing Fee: \$454.00  
(Large Plan Check)  
ADU# \_\_\_\_\_  
Received: \_\_\_\_\_  
 Approved  Denied

The plan check process for Accessory Dwelling Units (ADUs) is a 120-day period from the date a complete plan check application is submitted to the Building and Safety Department to the date permits are issued. ADU plan check reviews, which are not completed within the 120-day period, will be denied. It is the responsibility of the property owner to ensure that a complete ADU application, including plans and supporting documentation, is submitted to the Building Services Division. ADU applications, which do not meet all the minimum development standards, to include those standards in Los Alamitos Municipal Code (LAMC) Section 17.38.150, and the plan check submittal requirements, will not be accepted for plan check. **It** is the responsibility of the property owner to ensure that all subsequent plan re-checks are submitted to the Building and Safety Department within *two weeks* of receiving corrections.

**PROJECT PROPERTY ADDRESS** \_\_\_\_\_

APN Number \_\_\_\_\_

**PROPERTY OWNER** \_\_\_\_\_ Contact Person \_\_\_\_\_

Email (required) \_\_\_\_\_ Driver's License Number \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

**ARCHITECT** \_\_\_\_\_

Email (required) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

### PROPOSED PROJECT SPECIFICATIONS

Type of ADU: \_\_\_\_\_ Attached \_\_\_\_\_ Detached Living Space Square Footage \_\_\_\_\_

Height of ADU \_\_\_\_\_ Number of Bedrooms in ADU \_\_\_\_\_ Number of Stories \_\_\_\_\_

Parking Spaces provided (for ADU) \_\_\_\_\_ Covered Spaces \_\_\_\_\_ Distance from Public Transit \_\_\_\_\_

Parcel Dimensions: Width \_\_\_\_\_ Depth \_\_\_\_\_

Parcel Area \_\_\_\_\_ Lot Coverage of entire parcel (sq. ft.) \_\_\_\_\_

Setbacks: Front \_\_\_\_\_ Rear \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_

Distance from Main Dwelling \_\_\_\_\_

Does the ADU Contain:

Permanent Foundation  Yes  No

Kitchen  Yes  No

Bathroom  Yes  No

One Bedroom  Yes  No

Additional Parking Space  Yes  No

### MAIN DWELLING FACTS

Number of parking spaces (for main dwelling) \_\_\_\_\_ Covered Spaces \_\_\_\_\_

Living Space Square Footage \_\_\_\_\_ Garage Square Footage \_\_\_\_\_ Sprinklers Installed \_\_\_\_\_

Setbacks: Front \_\_\_\_\_ Rear \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_

### Requirements – Must Accompany Request (at a minimum)

1. **Three (3) sets of large plans, two (2) sets of engineering calculations to include Site Plan, Floor Plan, and Elevations (with the same materials used as main building), one (1) set of 11" x 17" plans**
2. **Photographs of the Site and adjacent properties**
3. **Title Report (less than six months old)**

I hereby certify that all information contained in this application, including all plans and materials required by the City's application submission requirements, is, to the best of my knowledge, true and correct. FALSE OR MISLEADING INFORMATION GIVEN IN THIS APPLICATION SHALL BE GROUNDS FOR DENYING APPLICATION. I hereby grant the City authority to enter onto the property to conduct site inspections and to post any required public notices.

Name of Property Owner(print) \_\_\_\_\_

Signature of Property Owner \_\_\_\_\_ Date \_\_\_\_\_