Main Contact Phone #: _____



Cassia County Accessory Dwelling Unit (ADU) Permit Application

(Please	Check) \Box (Actual)	or 🔲 (Approxin	nate)		City	State	Zip
2. Property Owner							
ľ	lame				Phone		
Address		City	State Zip				
3. Contractor							
Name					Phone		
Address		City	State Zip				
Contractor Registration	Number			Expir	es on:		(date
4. Parcel Number			Is the	re a residence	e existing on	this parcel?	Yes □ No
Reviewed by:			*For Reside number liste	ntial Permit only: I ed, the County Adn	f it is marked a re ninistrative Office		
			qualifies for	construction of a	residence.		
5. Recorded Deed Num	ibei (for new resider	itiai construction o	niy)				(submit co
6. Septic Permit Numb (Must be obtained from the So	er	lub 405-22 l-0		ID 00000 Talk al	(200) 670	0004 1 - 1 -	(submit co
(Must be obtained from the So	outh Central District H	ealth - 485 22nd S	treet Heyburn,	ID 83336 Telepi	ione: (208) 678	-8221 and subn	nitted with applica
7. Drive Approach Perlase designate which entity, if any, co	mit Number	he nermit is sought	By signature affix	red hereto, an auth	orized agent for d	esignated entity a	(submit co
been notified of this application and	that said entity may sub	mit in writing, indicat	ting its review of	the proposal and c	omments relative	to the matter for	which permit is sough
*Authorized Signature:	Signature				Title		
	-						
	Printed Name				Date		
					2410		
8. Applicable Irrigatio	n District or Can	al Company_	By signature affix	ved hereto, an auth		esignated entity a	cknowledges that ent
ase designate which entity, if any, co	n District or Can	he permit is sought.	By signature affix ting its review of	ted hereto, an auth the proposal and c	orized agent for d	esignated entity a to the matter for	cknowledges that ent which permit is sough
ease designate which entity, if any, co	n District or Can overs the area for which to d that said entity may sub	he permit is sought.	By signature affix ting its review of	ed hereto, an auth the proposal and c	orized agent for d omments relative	esignated entity a to the matter for	cknowledges that ent which permit is sough
ease designate which entity, if any, co s been notified of this application and	n District or Can overs the area for which t I that said entity may sub	he permit is sought.	By signature affix ting its review of	sed hereto, an auth the proposal and c	orized agent for d	esignated entity a to the matter for	cknowledges that ent which permit is sough
ease designate which entity, if any, co s been notified of this application and	n District or Can overs the area for which to d that said entity may sub	he permit is sought.	By signature affix ting its review of	ed hereto, an auth the proposal and c	orized agent for d omments relative	esignated entity a to the matter for	cknowledges that ent which permit is sough
*Authorized Signature: 9. Applicable Fire Dist	n District or Can wers the area for which ti d that said entity may sub Signature Printed Name rict	he permit is sought. mit in writing, indicat	ting its review of	the proposal and c	orized agent for domments relative Title Date	to the matter for	which permit is sough
*Authorized Signature: 9. Applicable Fire Distage designate which entity, if any, continued to the supplication and application and application and applicable signature:	n District or Can overs the area for which ti d that said entity may sub Signature Printed Name rict overs the area for which ti	he permit is sought. mit in writing, indicat me in writing, indicat me permit is sought.	ting its review of	the proposal and c	orized agent for domments relative Title Date Orized agent for d	to the matter for	which permit is sough
*Authorized Signature: 9. Applicable Fire Dist	overs the area for which tid that said entity may substituted. Signature Printed Name rict overs the area for which tid that said entity may substituted.	he permit is sought. mit in writing, indicat me in writing, indicat me permit is sought.	ting its review of	the proposal and c	orized agent for domments relative Title Date orized agent for domments relative	to the matter for	which permit is sough
*Authorized Signature: 9. Applicable Fire Dist ass designate which entity, if any, costs been notified of this application and *Authorized Signature: 9. Applicable Fire Dist ass designate which entity, if any, costs been notified of this application and	overs the area for which tid that said entity may substituted. Signature Printed Name rict overs the area for which tid that said entity may substituted.	he permit is sought. mit in writing, indicat me in writing, indicat me permit is sought.	ting its review of	the proposal and c	orized agent for domments relative Title Date orized agent for domments relative Title	to the matter for	which permit is sough
*Authorized Signature: 9. Applicable Fire Dist ase designate which entity, if any, control been notified of this application and *Authorized Signature: 9. Applicable Fire Dist ase designate which entity, if any, control been notified of this application and *Authorized Signature:	rict	he permit is sought. mit in writing, indicat mit in writing, indicat he permit is sought. mit in writing, indicat	By signature affix	the proposal and c	orized agent for domments relative Title Date orized agent for domments relative Title Date	esignated entity a to the matter for	which permit is sough
*Authorized Signature: 9. Applicable Fire Dist tase designate which entity, if any, co *Authorized Signature: 9. Applicable Fire Dist tase designate which entity, if any, co to been notified of this application and *Authorized Signature: 10. Applicable City, w	signature Printed Name Signature Printed Name rict Signature Printed Name rict Signature Printed Name First Signature Printed Name Signature Printed Name Signature Printed Name	he permit is sought. mit in writing, indicat he permit is sought. mit in writing, indicat of: Alk	By signature affixing its review of	sed hereto, an auth the proposal and c	orized agent for domments relative Title Date Orized agent for domments relative Title Title Date Title Date	esignated entity a to the matter for	cknowledges that ent which permit is sough
*Authorized Signature: 9. Applicable Fire Dist ase designate which entity, if any, co *Been notified of this application and *Authorized Signature: 9. Applicable Fire Dist ase designate which entity, if any, co been notified of this application and *Authorized Signature: 10. Applicable City, we asse designate correct city. By signate	on District or Can overs the area for which ti that said entity may sub Signature Printed Name rict overs the area for which ti that said entity may sub Signature Printed Name ithin City Limits ture affixed hereto, an au	he permit is sought. mit in writing, indicate he permit is sought. mit in writing, indicate of: Alk thorized agent for de	By signature affix ting its review of	sed hereto, an auth the proposal and c	orized agent for domments relative Title Date Orized agent for domments relative Title Title Date Title Date	esignated entity a to the matter for	cknowledges that entwhich permit is sough
*Authorized Signature: 9. Applicable Fire Dist ase designate which entity, if any, co *Been notified of this application and *Authorized Signature: 9. Applicable Fire Dist ase designate which entity, if any, co been notified of this application and *Authorized Signature: 10. Applicable City, we asse designate correct city. By signate	Signature Printed Name rict Overs the area for which tid that said entity may subside the said entities and the said entities are said entities and the said entities and the said entities are said en	he permit is sought. mit in writing, indicate he permit is sought. mit in writing, indicate of: Alk thorized agent for de	By signature affix ting its review of	sed hereto, an auth the proposal and c	orized agent for domments relative Title Date Orized agent for domments relative Title Date Title Date Date Date	esignated entity a to the matter for	cknowledges that ent which permit is sough
*Authorized Signature: 9. Applicable Fire Dist tase designate which entity, if any, cos *Authorized Signature: 9. Applicable Fire Dist tase designate which entity, if any, cos to been notified of this application and *Authorized Signature: 10. Applicable City, w ease designate correct city. By signat ay submit in writing any comments r	or District or Can overs the area for which ti that said entity may sub Signature Printed Name rict overs the area for which ti that said entity may sub Signature Printed Name ithin City Limits ture affixed hereto, an au elative to the matter for the signature Signature	he permit is sought. mit in writing, indicate he permit is sought. mit in writing, indicate of: Alk thorized agent for de	By signature affix ting its review of	sed hereto, an auth the proposal and c	orized agent for domments relative Title Date Orized agent for domments relative Title Date Title Date Title Date Title Date Title Title Title	esignated entity a to the matter for	cknowledges that ent which permit is sough
*Authorized Signature: 9. Applicable Fire Dist tase designate which entity, if any, cos *Authorized Signature: 9. Applicable Fire Dist tase designate which entity, if any, cos to been notified of this application and *Authorized Signature: 10. Applicable City, w ease designate correct city. By signat ay submit in writing any comments r	Signature Printed Name rict Overs the area for which tid that said entity may subside the said entities and the said entities are said entities and the said entities and the said entities are said en	he permit is sought. mit in writing, indicate he permit is sought. mit in writing, indicate of: Alk thorized agent for de	By signature affix ting its review of	sed hereto, an auth the proposal and c	orized agent for domments relative Title Date Orized agent for domments relative Title Date Title Date Date Date	esignated entity a to the matter for	cknowledges that ent which permit is sough
*Authorized Signature: 9. Applicable Fire Dist ase designate which entity, if any, control is been notified of this application and *Authorized Signature: 9. Applicable Fire Dist ase designate which entity, if any, control is been notified of this application and *Authorized Signature: 10. Applicable City, we have designate correct city. By signating any submit in writing any comments in *Authorized Signature: 11. Recorded Declarational shall file with the County Recorder	rict	he permit is sought. mit in writing, indicat he permit is sought. mit in writing, indicat of: Alk thorized agent for de which this permit is so	By signature affixing its review of Dion	sed hereto, an auth the proposal and c	orized agent for domments relative Title Date Orized agent for domments relative Title Date Title Date Title Date Title Date Title Date Title Date Accordance with	esignated entity a to the matter for Oak Other of this appli	cknowledges that entwhich permit is sough
*Authorized Signature: 9. Applicable Fire Dist ease designate which entity, if any, cos been notified of this application and *Authorized Signature: 9. Applicable Fire Dist ease designate which entity, if any, cos been notified of this application and *Authorized Signature: 10. Applicable City, w ease designate correct city. By signat any submit in writing any comments r *Authorized Signature: 11. Recorded Declarat shall file with the County Recorder attached to this application.)	rict	he permit is sought. mit in writing, indicat he permit is sought. mit in writing, indicat of: Alk thorized agent for de which this permit is so	By signature affixing its review of Dion	the proposal and c	orized agent for domments relative Title Date Orized agent for domments relative Title Date Title Date Title Date Title Date Title Date Title Date Accordance with	esignated entity a to the matter for Oak Other of this appli	cknowledges that entwhich permit is sough
*Authorized Signature: 9. Applicable Fire Distase designate which entity, if any, control and application application application application. 11. Recorded Declarate shall file with the County Recorder attached to this application.) 12. BUILDING AREA: Is	rict Printed Name Printed Name Signature Printed Name Signature Printed Name Finted Name Signature Printed Name Signature Printed Name Finted Name Printed Name Signature Printed Name Signature Printed Name Signature The Name Signature Printed Name Signature Or Name Signature Printed Name Signature	he permit is sought. mit in writing, indicat he permit is sought. mit in writing, indicat of: Alk thorized agent for de which this permit is so	By signature affix ting its review of Dion	sed hereto, an auth the proposal and c	orized agent for domments relative Title Date Orized agent for domments relative Title Date Title Date Title Date Title Date Title Date Title Date Accordance with	esignated entity a to the matter for Oak Other of this appli	cknowledges that entwhich permit is sough
*Authorized Signature: 9. Applicable Fire Dist ase designate which entity, if any, cos been notified of this application and *Authorized Signature: 9. Applicable Fire Dist ase designate which entity, if any, cos been notified of this application and *Authorized Signature: 10. Applicable City, we ease designate correct city. By signat ay submit in writing any comments r *Authorized Signature: 11. Recorded Declarat shall file with the County Recorder attached to this application.) 12. BUILDING AREA: Is Ma	Signature Printed Name Signature Printed Name rict Overs the area for which tid that said entity may substituted a said e	he permit is sought. mit in writing, indicat he permit is sought. mit in writing, indicat of: Alk thorized agent for de which this permit is so	By signature affix ting its review of Dion	the proposal and c	orized agent for domments relative Title Date Orized agent for domments relative Title Date Title Date Title Date Title Date Title Date Title Date Accordance with	esignated entity a to the matter for Oak Other of this appli	cknowledges that ent which permit is sough Ley cation and that said e
*Authorized Signature: 9. Applicable Fire Distease designate which entity, if any, costs been notified of this application and *Authorized Signature: 9. Applicable Fire Distease designate which entity, if any, costs been notified of this application and *Authorized Signature: 10. Applicable City, welease designate correct city. By signatinally submit in writing any comments in *Authorized Signature: 11. Recorded Declarate shall file with the County Recorder attached to this application.) 12. BUILDING AREA: Is Ma	rict Printed Name Printed Name Signature Printed Name Signature Printed Name Finted Name Signature Printed Name Signature Printed Name Finted Name Printed Name Signature Printed Name Signature Printed Name Signature The Name Signature Printed Name Signature Or Name Signature Printed Name Signature	he permit is sought. mit in writing, indicat he permit is sought. mit in writing, indicat of: Alk thorized agent for de which this permit is so	By signature affix ting its review of Dion	the proposal and c	orized agent for domments relative Title Date Orized agent for domments relative Title Date Title Date Title Date Title Date Title Date Title Date Accordance with	esignated entity a to the matter for Oak Other of this appli	cknowledges that entwhich permit is sough

phone: 208.878.7302 fax: 208.878.3510 **REQUIRED SUBMITTALS:** ** (two sets of plans that include the following are required with application) ** __ e. Copy of Drive Approach Permit __ a. Site Plan __ b. Copy of Septic Permit approval __ f. Letter from Applicable Fire Protection District __ g. Evidence of connection to PDU well __ c. Letter from Applicable Irrigation District __ h. Showing of compliance with recording or Canal Company __ d. Utility Services acknowledgement requirements for ADU's 13. **ZONING:** □ AP □ AR (Ag Waiver Must be Signed and Attached County Code: 9-7-2(C)) ☐ RA ☐ Burley Impact ☐ MU ☐ IC City of ☐ ALBION ☐ DECLO ☐ MALTA ☐ OAKLEY (AP Agricultural Prime; AR Agricultural Residential; RA Residential Agricultural; Burley Impact; MU Multiple Use; IC Industrial Commercial) **Additional Information:** SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING and HVAC. Electrical 1-800-839-9239 Plumbing and HVAC 1-800-955-3044 THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS. OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK HAS COMMENCED. THE FOLLOWING CONDITIONS MUST BE IN COMPLIANCE WITH COUNTY CODE: 1) Residences require a minimum one (1) acre of property. 2) A tract of land (since 04/29/78) cannot be divided into five (5) or more lots, unless approved as a subdivision. 3) Building set back from center of road is 54 ft. 4) Houses and attachments set back is 15 ft. from interior lot lines. 5) Accessory buildings set backs are 10 feet from interior lot lines. 6) ADU site not less than 300 sq. ft. and not more than 1000 sq. ft. 7) Only (1) ADU per lot. I hereby apply for a permit to do the work stated above, acknowledge that I have read this application, and hereby certify that the above information is complete and correct. I hereby certify that all work, material, and inspections will be in accordance with state and county adopted codes and ordinances, and that approval/final inspection will be obtained by the Cassia County Zoning and Building Department, prior to use and/or occupancy of structure for which permit is sought. The information contained in this application will become a public record upon filing with Cassia County. I hereby give specific written authorization for disclosure of such information, upon lawful request. Additionally, I hereby authorize agents of the county to enter upon this subject property for purposes of determining compliance with applicable county regulations and shall fully cooperate with agents of the county in such compliance audits. Signature of Property Owner Date **OR** Authorized Agent/Contractor For Office Use Only Date Application Received: By: Check# AS400 Rcpt#___ Deposit Received:

PLOT MAP

																						\neg
																						_
															_							_
															_							
																						_
																						\dashv
															\dashv							\dashv
																						-
																						_
															-							_
															_							_
																						\dashv
							On th	e plo	t plar —Nic	drav	wing	you n	eed	to she	OW: ildina	ι M.	ist ha	at In	ast F	/I foo	t	H
							2. In	terio	eror: داط	perty	Line	Meas	suren	nents		ıst be	9 no (closer	r thar	100 f	eet.	H
							3. Ai 4. O	ny Ea ther :	asem Struc	ents. tures	(Cai Dis—	om ce Meas nnot stance	Build es fro	Ovei om.	⁻)							Н
						L				00												

NAME:	SCALE: 1 Square =	feet.
ADDRESS:	Indicate distance from road	& interior property lines to project

W. Accessory Dwelling Units (ADU):

1. Purpose and Intent: It is the policy of Cassia County, Idaho to promote and encourage the creation and use of legal ADUs in a manner that enhances residential neighborhoods and helps residents meet their housing needs and realize the benefits of ADUs.

2. Definitions:

- a. ACCESSORY DWELLING UNIT: An Accessory Dwelling Unit (hereinafter ADU) is defined as a habitable living unit added to, created within, or detached from a single-family dwelling that provides basic requirements for living, sleeping, eating, cooking, and sanitation. ADUs must be placed on permanent foundations, and must meet required standards for a declaration of real property, and then be declared real property pursuant to all requirements of Cassia County Code.
- b. PRINCIPAL DWELLING UNIT: A Principal Dwelling Unit (hereinafter PDU) is defined as a single-family dwelling.

3. Application:

- a. The installation of an ADU in new and existing PDUs shall be allowed in zoning districts where single-family dwelling units are permitted on individual lots, subject to specific development, design, and performance standards set out elsewhere in County code.
- b. Before any construction occurs to create an ADU, the property owner shall obtain a building permit from the Cassia County Building Department.
- c. Any accessory unit built after June 28, 1993, but before adoption of these ADU regulations, which lacks specific zoning authorization hereunder shall not be considered a lawful non-conforming use, unless the property owner applies for a building permit for the ADU and brings the unit up to the health and safety provisions of the minimum housing code standards.

Any unit that would qualify as an ADU hereunder, but that was built before June 28, 1993, shall be considered a lawful non-conforming use.

On January 1, 2014, all owners of unlawful non-conforming units who have not brought them up to the health and safety standards of minimum housing code standards will be in violation of this section and subject to fines as regulated under applicable Cassia County Code related to building permit violations.

- d. An occupancy permit must be issued by the Cassia County Building Department prior to occupancy of an accessory dwelling unit created or modified pursuant to this Section.
- 4. Size and Design Regulations: The following size and design criteria shall be the prevailing regulations for developing and creating ADUs, when in conflict with existing County Code:
 - a. The ADU shall contain not less than 300 square feet and not more than 1000 square feet, excluding any related garage area and other non-living areas such as workshops or greenhouses.
 - b. The ADU shall comply with all applicable height, setback, building code, and health code requirements for the zoning district in which it is located.
 - c. ADUs shall be developed only on lots meeting the minimum lot size of one (1) acre.
 - d. The ADU may be attached to, or detached from, the PDU.
 - e. Developers are encouraged to design the ADU to comply with the standards of the "Cassia County Design Guidelines for the City Of Rocks and related areas" in alteration of an existing building or construction of a new building along the City of Rocks Scenic Byway.
- 5. Maximum Number of ADUs per Lot: Only one (1) ADU is permitted per residentially zoned lot. If there is no PDU on the lot, there can be no ADU on the lot, by definition.
- 6. Utility Service, Water and Waste Handling Requirements: Each ADU must be connected to the utilities of the PDU for that lot and may <u>not</u> have separate utility services, or a separate well. Septic system or other waste handling system for the ADU must be approved in advance by the South Central Public Health District.
- 7. Home Occupations: Home occupations may be allowed, subject to existing regulations, in either the ADU or the PDU, but not both.
- 8. Recording Requirements: Before obtaining a building permit for an ADU, the property owner shall file with the County Recorder a declaration of restrictions containing a reference to the deed under which the property was acquired by the present owner and stating that:
 - a. The accessory dwelling unit will not be sold separately from the principal dwelling unit and shall thus remain under common ownership.
 - b. The ADU is restricted to the size of no greater than 1000 square feet.
 - c. The owner of the property shall notify a prospective buyer of the limitations of this Subsection and to provide for the removal of improvements added to convert the premises to an accessory dwelling unit and the restoration of the site to a single-family dwelling in the event that any condition of approval or siting is violated. [Ord. 2012-07-01, 07-02-2012].

ACCESSORY DWELLING UNIT DEED RESTRICTION

	Deed Restriction is assigned to and runs with						
	ounty, Idaho as Instrument Number,						
said deed restrictions being made and entered into this day of, 20 byand, husband and wife, for themselves, th							
successors, and assigns, for the benefit of the County Ordinance Title 9 Chapter 9.	ne County of Cassia, State of Idaho pursuant to Cassia						
	a certain parcel of real property located at , Cassia County, Idaho, on real property described as:						
[Insert legal description of real property her	re.]						
upon which is situated a dwelling unit in actouse as an Accessory Dwelling Unit pursu	ddition to the principal dwelling, which owners desire ant to Cassia County Code.						
WHEREAS, the owners agree, acce Accessory Dwelling Unit under the Cassia C	ept and impose certain conditions upon the use of the County Code.						
Now, THEREFORE, in consideration in the Cassia County Code, owner hereby co	on of the mutual promises and obligations contained ovenants and agrees as follows:						
·	e parcel of real property herein shall not be sold unit and shall remain under common ownership at all						
2. The Accessory Dwelling Unit shall be a thousand (1000) square feet.	restricted at all times to a size of no greater than one-						
all prospective buyers of the principa deed restriction, and of the limitation this Accessory Dwelling Unit and the	ich the principal dwelling unit resides shall notify al dwelling unit of the limitations provided by this as contained under Cassia County Code regarding the obligation to convert the Accessory Dwelling ag in the event any condition of approval for this						
IN WITNESS WHEREOF, the bed Deed Restriction dated this day of	elow named execute this Accessory Dwelling Unit f, 20						
]						
[Signature of Property Owner]	Signature of Property Owner]						
[Printed Name of Property Owner]	[Printed Name of Property Owner]						

STATE OF IDAHO)	
: ss. County of Cassia)	
Notary Public in and for said State,	e the person whose name is subscribed to the within
IN WITNESS WHEREOF, I ha year first in this certificate written.	ve hereto set my hand and seal the day, month and
[Seal]	Notary Public for Idaho
	Residing at:
	My Commission Expires:
STATE OF IDAHO) : ss. County of Cassia)	
Notary Public in and for said State, known to me, or identified to me, to be instrument and acknowledged to me that	e the person whose name is subscribed to the within
[Seal]	Notary Public for Idaho
	Residing at:
	My Commission Expires: