ACCESSORY DWELLING UNIT (ADU)  
PROJECT INFORMATION QUESTIONNAIRE

General Information

1. Applicant (name and address): _____________________________________________________
   ______________________________________________________________________________
   Phone: ____________________  E-mail: _____________________________________

2. Project Location (address and cross streets): _______________________________________
   ______________________________________________________________________________

Existing Conditions

3. Existing zoning: ___________________
   Additive zone: ____________________
   Specific plan area: ____________________

4. Adjacent zoning and land uses:
   North: ____________________
   South: ____________________
   East: ____________________
   West: ____________________

5. From what source does the property currently receive the following public services?
   Water: ____________________
   Sewer: ____________________

6. How many acres and/or square feet is the property? ____________________

7. How many square feet is the primary structure (do not include garage)? ________________

8. How many bedrooms is the primary structure? ____________________
9. How many stories are the existing structures? ________________________________

10. How many square feet is the garage? ________________________________

11. Is the garage attached or detached? ________________________________

12. Total square footage of other structures on the property? ________________________________

13. Total square footage of paving and/or hardscape on the property? ________________________________

14. Total square footage of landscaped areas? ________________________________

Project Description

15. Describe the proposed ADU to be constructed (i.e. conversion, addition, new structure, divide house, number of bedrooms, etc)? 
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

16. What is the square footage of the proposed ADU? ________________________________

17. Divide item 16 by item 7 and enter the answer here (must be less than 0.50). ________________

18. Pursuant to Oxnard Municipal Code §16-467(K), “The primary residence or the accessory dwelling unit shall be occupied by the property owner.” Will the owner occupy one of the units and if so, which unit will be occupied by the owner?
   ___________________________________________________________________

19. Will either the primary unit or the accessory unit be offered for rent? If so, which will be offered and what is the anticipated rental rate?
   ___________________________________________________________________

20. Total number of off-street parking spaces proposed:
   Garage: ________________ Open (uncovered): ________________

Certification

I hereby certify that the statements furnished above, and in the attached exhibits, present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements and information presented are true and correct to the best of my knowledge.

__________________________  __________________________
Date                      Signature

City of Oxnard
Planning Division

Revised 4/2/18