



Planning Department  
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**For Planning Department Use:**

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

Filing Fee: \$500.00

Case No.(s): \_\_\_\_\_

Assigned Planner: \_\_\_\_\_

**APPLICATION FOR ADMINISTRATIVE ACTION**

Accessory Dwelling Units (ADUs)

**INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

**ATTACH PLANS (SITE PLAN, FLOOR PLAN, ELEVATIONS) AFTER CONSULTATION WITH PLANNER**

**APPLICANT INFORMATION**

Property Owner(s) \_\_\_\_\_

Property Owner(s) Mailing Address \_\_\_\_\_

Property Owner Phone Number and Email Address \_\_\_\_\_

Architect/Designer Name \_\_\_\_\_

Architect/Designer Mailing Address \_\_\_\_\_

Architect/Designer Phone Number and Email Address \_\_\_\_\_

**PROJECT LOCATION**

Address \_\_\_\_\_

**LAND USE**

Zone \_\_\_\_\_ General Plan Land Use Designation \_\_\_\_\_

Total Floor Area of Existing Primary Housing Unit(s): \_\_\_\_\_ square feet

**ADU PROJECT DESCRIPTION**

Total Floor Area of Proposed Accessory Dwelling Unit (ADU): \_\_\_\_\_ square feet

ADU Height \_\_\_\_\_ feet

Type of ADU. Attached \_\_\_\_\_ Detached \_\_\_\_\_ Junior Accessory Dwelling Unit (JADU) \_\_\_\_\_

Conversion \_\_\_\_\_ New construction \_\_\_\_\_

**ADU TENANCY**

Will the ADU be rented? Yes \_\_\_\_\_ No \_\_\_\_\_

If the ADU is to be rented, what is the expected monthly rental amount? \$ \_\_\_\_\_

If the ADU is intended for a family member(s) who will not pay rent, what is the monthly income of the family member(s) who will live in the ADU? \$ \_\_\_\_\_

**APPLICANT SIGNATURE(S)** \_\_\_\_\_