



Middle Housing Request

NEW CONSTRUCTION CONVERSION

Applicant

Date Filed

Pre-Application Meeting Date

File Number(s)

CORRESPONDENCE

All correspondence related to this application should be directed to the approved contact listed below.

Owner Contractor Engineer Architect/Landscape Architect

Name

Company

Address

City

State

Zip

Phone

Email

CURRENT PROPERTY INFO

Owner Name (if different from applicant)

Owner Address

Owner Phone

Property Address

Parcel ID

Land Use Classification (see sector plan maps)

Zoning

DETAILS OF REQUEST

MIDDLE HOUSING TYPE (4.6.A)

Duplex (side-by-side)

Duplex (stacked)

Triplex

Fourplex

Townhouse (small: 3-4 units)

Number of Units: _____

Townhouse (large: 5-8 units)

Number of Units: _____

Multiplex

Number of Units: _____

STAFF USE ONLY

BUILDING ELEMENTS (4.6.C)

Lot Width (ft.): _____ Building Width (ft.): _____ Building Depth (ft.): _____ Height (stories): _____

CONVERSIONS ONLY (4.6.F)

Existing Building Type: Single-Family House Duplex Other: _____

New Type: _____

Interior Renovation

Addition

Footprint Width (ft.): _____ Footprint Depth (ft.): _____ Height (stories): _____

PARKING (4.6.D)

Number of Spaces Provided: _____

Fee 1	Fee 2	Fee 3	Total

AUTHORIZATION

I declare under penalty of perjury the foregoing is true and correct:
1) He/she/it is the owner of the property AND 2) The application and all associated materials are being submitted with his/her/its consent

SUPPORTING DOCUMENTATION ENCLOSED

CHECKLIST

Applicant Signature

Please Print

Date

Phone Number

Email

Property Owner Signature

Please Print

Date Paid