

ZONING

175 Attachment 5

Town of Wolfeboro

Application for Accessory Dwelling Unit Certificate of Use
[Added 3-14-2017 ATM by Art. 2]

Office	Certificate of Use # _____	Application Fee (new) <u>\$50.00</u>	Check # _____	Date Received _____
Use Only	(if new)	<u>0</u>		
	Existing Certificate of Use # (if renewal) _____	(renewal)		Received by _____

APPLICATION TYPE (check one): ☐ NEW ☐ RENEWAL (due January 1st each year)

OWNER AND AGENT INFORMATION

Name of Property Owner(s) _____
Address of Property Owner(s) _____
Telephone # _____ E-Mail Address _____
Name of Agent (if different from owner) _____
Address of Agent _____
Telephone # _____ E-Mail Address _____
Relationship of Agent to Property Owner _____

PROPERTY INFORMATION

Property Address _____ Assessor's Map # _____ Lot # _____
Zoning District(s) _____ ADU Building Permit # _____
Total Area of Accessory Dwelling Unit (sq. ft.) _____ % of Area Occupied by ADU _____

Signature(s) of Property Owner(s): _____ Date: _____

Signature of Agent (if different from owner): _____ Date: _____

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(For Office Use Only - FOR RENEWALS ONLY)

Approved/Denied (circle one)

By: _____ Date: _____
Code Enforcement Officer

WOLFEBORO CODE

Accessory Dwelling Unit Questions

Yes No (check one)

- | | | |
|--------------------------|--------------------------|--|
| ☐ | ☐ | Has the Agent or the property owner ever obtained an Accessory Dwelling Unit (ADU) Conditional Use Permit from the Planning Board for this property? |
| ☐ | ☐ | Will the ADU be located within the single-family dwelling, attached to the single-family dwelling? If no, stop; your proposal will not qualify as an ADU. |
| ☐ | ☐ | Will the ADU be constructed in a manner that ensures the property maintains the appearance of a single-family dwelling and will not look like a duplex or other multifamily structure? If no, stop; your proposal will not qualify as an ADU. |
| ☐ | ☐ | Will the entry door to the ADU be located on the side or to the rear of the structure in which the ADU is located? |
| ☐ | ☐ | If no, is it physically impossible to relocate that entryway(s) so that it is located on the side or rear of the structure in which the ADU is located? |
| ☐ | ☐ | Will the ADU have an area not exceeding 30% of the total habitable floor area of the single-family dwelling or 750 square feet, whichever is larger? |
| ☐ | ☐ | Will at least one dedicated off-street parking space be provided for the ADU? If no, stop; your proposal will not qualify as an ADU. |
| ☐ | ☐ | Will the property owner reside within either the single-family dwelling or the proposed ADU? If no, stop; your proposal will not qualify as an ADU. |
| ☐ | ☐ | If municipal sewer is not available, will the septic system meet New Hampshire Water Supply and Pollution Control Division requirements for the combined system demand for total occupancy of the premises? If no, stop; your proposal will not qualify as an ADU. |

This application must be accompanied by the following:

1. Floor plan of ADU (if the ADU occupies only a portion of the floor on which it is located, please include a plan of the entire floor).
2. Architectural renderings of the structure as it will appear when the ADU is constructed.
3. Photographs of structure where the ADU will be located (if the structure is existing).

******PLEASE NOTE: POST-CONSTRUCTION PHOTOGRAPHS** of the structure where the ADU is located must be provided to the Code Enforcement Officer prior to obtaining a Certificate of Occupancy. ********

CERTIFICATION

I/We do hereby verify by signing this application that I/we meet the guidelines for an Accessory Dwelling Unit (ADU) set forth in § 175-57.1 of the Zoning Ordinance of the Town of Wolfeboro. I/We understand that we must obtain a Certificate of Occupancy from the Building Department in order to operate the ADU. I/We understand that POST-CONSTRUCTION PHOTOGRAPHS of the structure where the ADU is located must be provided to the Code Enforcement Officer prior to obtaining a Certificate of Occupancy.

ZONING

If the application for the accessory dwelling unit is approved, I/we will comply with the ordinances of the Town of Wolfeboro, in the occupancy of the ADU. I/we agree to allow the Code Enforcement Officer or his designee to inspect the subject property upon demand to ensure compliance with all requirements.

SIGNATURES

Signature(s) of Property Owner(s): _____ Date: _____

Signature of Agent (if different from owner): _____ Date: _____

=====

(For Office Use Only - FOR NEW APPLICATIONS ONLY)

Approved/Denied (circle one)

By: _____ Date: _____

Code Enforcement Officer

Condition(s) of Approval (if applicable)

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Reason(s) for Denial (if applicable)

- 1) _____
- 2) _____
- 3) _____
- 4) _____