SUPPLEMENTAL APPLICATION
LAND USE (CUP/ACUP)
ACCESSORY DWELLING UNIT (ADU)
ACCESSORY LIVING QUARTERS (ALQ)

Kitsap County Code (KCC) is available online at: [http://www.codepublishing.com/wa/kitsapcounty/](http://www.codepublishing.com/wa/kitsapcounty/). For zoning regulations go to KCC Title 17 Zoning. For regulations on ADUs or ALQs, go to KCC 17.381.060.B.3 & 4.

**NOTE:** This permit type requires a Submittal Appointment. When you have assembled all required submittal items, please call (360)337-5777 to schedule your Permit Submittal Appointment.

Applicant Name: ______________________________ Assessor Tax Parcel #: __________________________

Project Name: ____________________________________________

**Section 1 – General Information**
Select the permit type you are applying for:
- [ ] Administrative Conditional Use Permit (ACUP)
- [ ] Conditional Use Permit (CUP)
- [ ] ADU Building Permit only (within urban area where ADU is a permitted (P) use)
- [ ] ALQ Building Permit only

Building Permit #: __________________________

**Section 2 – Project Details**
Number of existing dwelling units: _______
Number of proposed dwelling units: _______
Number of existing living quarters: _______
Number of proposed living quarters: _______

Where does owner currently reside?
- [ ] single family residence (SFR)
- [ ] accessory dwelling unit (ADU)
- [ ] off-site; location: __________________________________________

Where will owner reside after the ADU or ALQ is constructed and/or approved?
- [ ] single family residence (SFR)
- [ ] accessory dwelling unit (ADU)
- [ ] accessory living quarters (ALQ)
- [ ] off-site; location: __________________________________________

Square footage of the primary SFR: ___________
Square footage of the ADU: ___________
Square footage of the ALQ: ___________
Distance (in feet) between the primary SFR and ADU: ___________
Indicate setbacks from the property line (in feet) for the:

SFR:
  Front: _____  Side: _____  Rear: _____

ADU:
  Front: _____  Side: _____  Rear: _____

ALQ:
  Front: _____  Side: _____  Rear: _____

Health District approval granted?
☐ Yes
☐ No

Type of construction: ________________________________ (stick built, manufactured home, etc.)

Street entrance (vehicular access):
☐ same as SFR
☐ different than SFR

Number of parking spaces available for:
SFR: _______
ADU: _______
ALQ: _______

For ADU applications only:
Kitsap County Code prohibits ADUs and Accessory Living Quarters on a property at the same time. Are accessory living quarters on the property?
☐ Yes
☐ No

For ALQ applications only:
Kitsap County Code prohibits ALQs and Accessory Dwelling Units on a property at the same time. Is an ADU on the property?
☐ Yes
☐ No

Section 3 – Narrative Project Support
Narrative of how the ADU will be/is designed to maintain the appearance of the SFR