City of Yreka Building Department
701 Fourth Street
Yreka, CA 96097

Declaration of Accessory Dwelling Unit (ADU) Fee Waiver Application

Applicant Information

Name: _____Address: _____

Phone & Email: _____

Project Address (if different): _____

I, _____, hereby certify and declare the following in connection with my application for an Accessory Dwelling Unit (ADU) building permit and associated fee waiver:

1. I have submitted a complete ADU building permit application to the City.
2. I am requesting a fee waiver at the time of this application.
3. I certify that:
    a. The ADU will be used for residential occupancy for periods of not less than thirty (30) consecutive days;
    b. I have not received a waiver under this program previously;
    c. I accept responsibility for all non-waived fees; and
    d. I consent to compliance monitoring by the City or its authorized representatives to verify adherence to program requirements.

I understand that providing false information or failing to comply with these terms may result in the denial or revocation of the fee waiver and/or other enforcement actions as provided by law.

I declare under penalty of perjury under the laws of the State of California that the foregoing statements are true and correct.

Applicant Signature: _____

Printed Name: _____Date: _____