Community Development Department
9291 Old Redwood Highway
Windsor, CA 95492-0100
Planning (707) 838-1021
adu@townofwindsor.ca.gov

ACCESSORY DWELLING UNIT ACKNOWLEDGEMENT FORM

Property Owner Information		
Property Owner(s):		
Property Owner Address (street number and name, city, state, zip code):		
Phone no:	**E-mail address:**	

Accessory Dwelling Unit Information
Primary Dwelling Address:
ADU Building Permit Number:

Property Owner **Rental of Accessory Dwelling Unit Acknowledgement**		
Pursuant to State law and Zoning Ordinance section 17.82.040.E., if an accessory dwelling unit is rented, the accessory dwelling cannot be rented for terms of less than 30 days.		
I have read the above accessory dwelling unit rental restriction and acknowledge that, if rented, the accessory dwelling unit cannot be rented for terms of less than 30 days. I, the undersigned, hereby state that I am the owner of record of the affected property and agree to abide by the rental restriction requirement. To the best of my knowledge all information submitted as part of this acknowledgement form is true and accurate.		
Property Owner Name (Print):	**Property Owner Signature:**	**Date:**
Property Owner Name (Print):	**Property Owner Signature:**	**Date:**