



Pre-Reviewed ADU Application

Daly City Building Division
333 90th St, Daly City, CA 94015
Ph: 650-991-8061 / Fax: 650-991-8070
Email: buildingdivision@dalycity.org / www.dalycity.org

Permit Number

Project Information

| | | |
|---|---|----------------------|
| Project Address: | | Description of Work: |
| Project Valuation: | | |
| Is this building sprinklered? <input type="checkbox"/> Yes <input type="checkbox"/> No | This building is: <input type="checkbox"/> Residential | |

Applicant Information

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|---------------|
| Agent Name: |
| Address: |
| Phone Number: |
| Email: |

Owner Information

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|---------------|
| Owner Name: |
| Address: |
| Phone Number: |
| Email: |

Designer Information

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|-----------------------------------|
| Architect/Designer/Engineer Name: |
| License Number: |
| Address: |
| Phone Number: |
| Email: |

REQUEST FOR ADU MODEL PLAN REVIEW

- ☐ I understand that pre-review of my ADU plans does not constitute an endorsement or recommendation of my design or my business services by the City of Daly City.
- ☐ I understand that, should my ADU plans be pre-reviewed, a valid building permit is still required in order to construct my ADU within the City of Daly City.
- ☐ I understand that all pre-reviewed ADU plans are listed publicly on the City of Daly City's webpage. I give the City of Daly City permission to share my contact information (name, email, phone, and webpage).
- ☐ I understand that, should my ADU plan be pre-approved, any amendments or new code adoption would void the approval and plans will be required to be submitted for re-review.

I certify under penalty of perjury that I have read this application and state that the information is true and correct. I agree to comply with all local ordinances and the information is true and correct. I agree to comply with all local ordinances and the State laws relating to Building Construction and I make this statement under penalty of law. I hereby authorize representatives of this City/County to enter on the above-mentioned property for inspection purposes.

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|-------|------------------------|
| Date: | Owner/Agent Signature: |
|-------|------------------------|