



## ADU Pilot Program Application

The City of Rochester will reimburse an award recipient of the ADU Pilot Program up to \$20,000 in development fees and indirect costs associated with the development of and ADU. All reimbursements will be at the discretion of City staff and in accordance with the policy guidelines for this program. Applications for this program should be submitted after the construction of the ADU is completed and a Certificate of Occupancy has been issued by the City of Rochester.

**Applicant/Point of Contact: The Applicant will be the point of contact on all matters concerning this application.**

<b>Name:</b>		<b>Title (if Applicable):</b>	
<b>Company (if Applicable):</b>			
<b>Street Address:</b>			
<b>City:</b>	<b>State:</b>	<b>Zip:</b>	
<b>Email:</b>		<b>Phone:</b>	

**Project Details: Please complete to the best of your knowledge.**

<b>Project Site Location (Major Cross Streets):</b>	
<b>Street Address:</b>	
<b>Parcel ID Number:</b>	
<b>Current Land Use Designation:</b>	<b>Current Zoning Designation:</b>

**Additional Project Information: Please provide a description of the constructed ADU (attached, detached, above garage, square footage, number of bedrooms/bathrooms, etc.).**

**Reimbursement Requests: Please list the fee/indirect cost & the amount for which you are requesting reimbursements.**

	Fee/Indirect Cost Description	Date of Payment	Amount Paid
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Total Reimbursement Request: \$ \_\_\_\_\_

**Supplementary Project Data:** With this completed application, please include the following:

- Paid receipts for any/all fees and indirect costs for which you are requesting reimbursements.
- Detailed rationale for any indirect costs for which you are requesting reimbursements.
- A copy of the Certificate of Occupancy issued by City Staff.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

<b>To be Completed by City Staff:</b>	
Reviewed and Approved by:	Date:
Account:	Subledger:

Attached: Receipts and other documentation