

ANNUAL COMPLIANCE SWORN STATEMENT FOR 20____

Annually on or before February 1, Accessory Dwelling Unit (ADU) owners are required to submit verification that the Accessory Dwelling Unit is being occupied in accordance with the Deed Restriction Agreement and the Town of Superior's Accessory Dwelling Guidelines.

It is the Town's goal to make the annual compliance process as easy as possible in the most efficient manner. Please complete the following fields, provide relevant supporting documentation, sign, and submit to Town of Superior Planning Department.

1.	Accessory Dwelling Unit Address: Owner Name:	
	Principal Dwelling Address:	
	Owner Mailing Address (if different than Principal address):	
	Owr	ner Phone:
	Owr	ner Email Address:
2.	Occupancy Requirements:	
	a.	No more than three (3) unrelated persons shall occupy an ADU at any time;
	b.	One (1) or more of the property owners shall occupy either the principal dwelling unit or the ADU at all times; and
	c.	If the ADU is temporarily unoccupied, the principal dwelling unit may also be unoccupied.
3.	Certification:	
addre this A	ss, is t annual	below, I affirm and declare under penalty of perjury that the ADU, located at the above being occupied in accordance with the Occupancy Requirements stated in Section 2 of Compliance Statement and the Deed Restriction Agreement and that the statements in this Compliance Statement are true and correct.
Signa	ture:	
Pleas	e Prin	t Your Name:
Doto		