



COUNTY OF KAUA'I DEPARTMENT OF PLANNING

ADDITIONAL DWELLING UNIT (ADU) (Permitting Information & Instructions)

- **CHECK YOUR DEED FOR RESTRICTIONS ON DEVELOPMENT**
Please check BEFORE you apply for your ADU Permit. Please be cognizant that there are some lots that may qualify for an ADU, but are subjected to private restrictions or covenants that prohibit a second dwelling on the parcel. The ADU Ordinance does not supersede these restrictions. COMPLAINT IS YOUR RESPONSIBILITY. If you violate a deed restriction by building and ADU on your parcel, your neighbors could initiate legal measures to enforce the restriction and may result in forfeiture & removal of the ADU.
- **PLOT PLAN**
A Plot Plan that is drawn to scale SHALL be submitted with clearance form for all government agencies to review. The Plot Plan SHALL be 8-½" X 14" in size (legal sheet) and identify the following:
 1. All **legal boundary lines** of the lot;
 2. All **existing structures or improvements**, including cesspool(s), sewage disposal system(s), driveways, concrete slabs, etc.;
 3. The **location** of the Proposed ADU and its approximate **size**;
 4. The **roadway(s)** being proposed for access IF the property abuts more than one (1) street; and
 5. The **location of the required two (2) additional parking stalls** to accompany the ADU, and the existing two (2) parking stalls for the existing residence.
- **PROCESS**
The Applicant shall start with the Planning Department and return the form to the Planning Department after all the agencies have signed UNLESS an agency had determined that the property does not qualify for an ADU.
- **QUALIFYING REQUIREMENTS**
There may be conditions imposed by the reviewing agencies to enable the Applicant to qualify for an ADU. It shall be the Applicant's responsibility to resolve these conditions/requirements with the respective agency(ies) BEFORE proceeding to the next reviewing agency, except the Department of Public Works.
- **INTENT OF CLEARANCE FORM**
This clearance form is to determine whether a property QUALIFIES for an ADU. THERE MAY BE INSTANCES WHEN A PARCEL DOES NOT QUALIFY for whatever reasons specified. Due to the provisions of the ADU law, government agencies **cannot** deviate from this law.
- **ADU ORDINANCE**
Please note that copies of the Additional Dwelling Unit ordinance as well as the Comprehensive Zoning Ordinance (County Ordinance No. 935), with amendments, can be obtained and purchase at the County Clerk's Office.

Please be aware that the construction of the ADU shall comply with the requirements set forth in Article 15 of the Comprehensive Zoning Ordinance (CZO), as amended.

**COUNTY OF KAUA‘I
DEPARTMENT OF PLANNING**

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(Permitting Information & Instructions)**

○ **APPLICABLE FEES**

Upon the successful completion of the ADU Clearance Form, and upon application for building permit for the ADU, the following fees shall be collected by the Planning Department:

1. Class II Zoning Permit fee of **sixty dollars (\$60.00)**;
2. A Park Fee of **One Hundred-Fifty Dollars (\$150.00)** for the ADU, provided that the primary residence(s) on the parcel was built after May 20, 1977. No Park Fee will be assessed if the primary residence was constructed prior to that date.
3. An Environmental Impact Assessment (EIA) of Two Hundred-Fifty Dollars (\$250.00), provided that the primary residence on the parcel was built after August 11, 1980. No EIA Fee will be assessed if the primary residence was constructed prior to that date.

THE ABOVE FEES SHALL BE PAID and made payable to the “*County of Kaua‘i, Director of Finance.*”

○ **SITE INSPECTION**

If necessary, the Planning Department may conduct field investigation in order to verify the accuracy of the plot plan. Staking out the proposed structure may be required.

○ **ROAD WIDENING**

Please be cognizant that when a roadway right-of-way width is less than County Standards, the Applicant shall be required to execute either of the following methods in order to accommodate the future widening of the roadway:

1. **Dedicate land; OR**
2. **Establish a road widening reserve.**

It is important to understand that this should not be confused to mean that the pavement portion of the road is to be widened. Abutting landowners on each side of the road will be required to provide their “fair share” area in order to avoid one landowner from being burdened with the road widening requirement. Please note the difference between the 2 methods mentioned above:

- DEDICATION involves conveying a portion of one’s property to the County to widen the roadway.
- RESERVE involves designating a portion of one’s property for widening in lieu of dedicating land. The reserve will be recorded with the property and is intended to inform the landowner of the roadwidening encumbrance (similar to an easement).

Please understand that NO STRUCTURES are permitted within the reserve. Fences and walls may be permitted at the owner’s choice. Prior to building permit approval, the Applicant will be required to execute an Agreement for the methods noted above and it shall be recorded.

COUNTY OF KAUA'I
 ADDITIONAL DWELLING UNIT (ADU)
 FACILITIES CLEARANCE FORM

(TO BE COMPLETED BY THE APPLICANT)

APPLICANT(S): Print _____	Signature _____
Print _____	Signature _____
TMK: _____	LOT SIZE: _____
STREET FRONTING ADU: _____	
CONTACT PHONE NO. _____	MAILING ADDRESS: _____
PROPOSED: <input type="checkbox"/> One Additional Unit <input type="checkbox"/> Two New Units <input type="checkbox"/> Guest House Conversion <input type="checkbox"/> Other:	

PLANNING DEPARTMENT USE ONLY	
ZONING: _____	SLUD: _____
FEE: <input type="checkbox"/> EIA \$ _____	<input type="checkbox"/> PARK \$ _____
<input type="checkbox"/> ZONING PERMIT \$ _____	
COMMENTS: _____	SMA: <input type="checkbox"/> YES <input type="checkbox"/> NO
_____	_____
_____	_____
_____	Date

(TO BE COMPLETED BY REVIEWING AGENCIES)

DEPARTMENT OF PUBLIC WORKS (DPW)	
Street Name: _____	Paved: <input type="checkbox"/> YES <input type="checkbox"/> NO
Pavement continuous to Major Thoroughfare: <input type="checkbox"/> YES <input type="checkbox"/> NO	Pavement Width: _____ Ft.
Pavement Condition: <input type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR	
(NOTE: If roadway is not paved, or pavement is not continuous to a Major Thoroughfare, refer Applicant to the Planning Department)	
Flood Zone: <input type="checkbox"/> YES <input type="checkbox"/> NO	_____
_____	Engineering Division
_____	Date
Public Sewer Service Available: <input type="checkbox"/> YES <input type="checkbox"/> NO	Public Sewer Service: <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMENTS: _____	_____
_____	_____
_____	Wastewater Division
_____	Date

STATE DEPARTMENT OF HEALTH (DOH)	
Sanitary Sewer System: <input type="checkbox"/> PRIVATE <input type="checkbox"/> INDIVIDUAL WASTEWATER	_____
<input type="checkbox"/> ADEQUATE <input type="checkbox"/> INADEQUATE	_____
COMMENTS: _____	_____
_____	_____
_____	Department of Health
_____	Date

FIRE DEPARTMENT	
Fire Protection: <input type="checkbox"/> YES <input type="checkbox"/> NO	If YES, fire protection is: <input type="checkbox"/> ADEQUATE <input type="checkbox"/> INADEQUATE
COMMENTS: _____	_____
_____	_____
_____	Fire Department
_____	Date

DEPARTMENT OF WATER (DOW)	
Water System: <input type="checkbox"/> PRIVATE <input type="checkbox"/> PUBLIC	_____
NOTE: Applicable charges must be paid PRIOR to building permit approval. At the present time, these charges are:	
<input type="checkbox"/> Facilities Reserve Charge \$ _____	<input type="checkbox"/> Water Meter Installation \$ _____ (Upon Request)
Requirements/Conditions for approval are subject to change.	
COMMENTS: _____	_____
_____	_____
_____	Department of Water
_____	Date

PLANNING DEPARTMENT	
Street Name: _____	Existing Width: (FT.) _____
Dedication: (FT.) _____	Required Width: (FT.) _____
Reserve: (FT.) _____	<input type="checkbox"/> Not Applicable
Roadwidening Provisions: <input type="checkbox"/> YES <input type="checkbox"/> NO	If YES, please specify: _____
_____	_____
Road Improvements Required: <input type="checkbox"/> YES <input type="checkbox"/> NO	If YES, please specify: _____
_____	_____
<input type="checkbox"/> QUALIFY <input type="checkbox"/> NO QUALIFY	_____
_____	Planning Department
_____	Date
Requirements complied with: <input type="checkbox"/> YES <input type="checkbox"/> NO	_____
<input type="checkbox"/> QUALIFY <input type="checkbox"/> NO QUALIFY	_____
_____	Planning Department
_____	Date