

Return to (Applicant):

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**ACCESSORY DWELLING UNIT TITLE NOTIFICATION**

Parcel Number: \_\_\_\_\_ ADU Application Number: \_\_\_\_\_

Parcel Address: \_\_\_\_\_

Present Owners: \_\_\_\_\_

Legal Description:

This AGREEMENT made and entered into this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_,

By and between \_\_\_\_\_ ("landowner") and Pierce County Washington by the Department of Planning and Land Services, is herein memorialized through the execution of this AGREEMENT.

NOW THEREFORE, in order that the rights and duties of the respective parties and their successors be known for the record now and in the future, it has been agreed between the parties as follows:

In accordance with Pierce County Code, Section 18A.37.120 Accessory Dwelling Unit., the landowner has agreed to comply with the following:

1. That the landowner will occupy the principal dwelling or the accessory dwelling unit as the "owner occupant"
2. That the placement and construction of the accessory dwelling unit will be consistent with a copy of the floor plan and site plan which are ATTACHED to this agreement.
3. That compliance with the requirements and conditions of Pierce County Code, Section 18A.37.120 Accessory Dwelling Unit, shall be the responsibility of the Landowner, the Landowner's heirs, and successors and that said conditions shall be binding unless modified or amended by the mutual agreement of both parties.

\_\_\_\_\_  
Signature of owner(s): \_\_\_\_\_

\_\_\_\_\_  
Print Name: \_\_\_\_\_

STATE OF WASHINGTON    )  
  ) ss  
COUNTY OF PIERCE        )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared \_\_\_\_\_

\_\_\_\_\_ who is known to be the individual described in and who executed the foregoing instrument, and acknowledged to me that he/she/they signed and sealed the said instrument as a free and voluntary act and deed for the uses and purposes therein mentioned.

Given under my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for the State of Washington

Residing at \_\_\_\_\_

My commission expires \_\_\_\_\_

\_\_\_\_\_  
AFFIX SEAL OR STAMP ABOVE THIS LINE