

Plan Check # \_\_\_\_\_  
 Date: \_\_\_\_\_

**CITY OF ENCINITAS  
 PLANNING AND BUILDING DEPARTMENT  
 HOUSING DEVELOPMENT TRACKING**



The following information must be submitted to the State of California to track new housing development for all income levels. Please complete this form to the best of your knowledge and submit prior to building permit issuance.

Project Name: \_\_\_\_\_ Anticipated date of final inspection: \_\_\_\_\_

Structure Description:    Single-Family       Two-Four Unit       5+ Unit Structure   
    Accessory unit       Mobilehome       Remodel/Reconstruction

Project Address: \_\_\_\_\_ APN: \_\_\_\_\_

Project's planned initial occupancy is for: Rental occupant     Owner occupant

Was an affordable housing deed restriction recorded on the property? YES     NO

**Please indicate the number of units (and bedrooms in each unit) that will be provided and a price range. If the home is being built owner/builder, please indicate the estimated appraised value upon completion. Please indicate a sales price range even if the initial occupancy of the unit will be owner-occupied and the unit is not intended to be sold or rented. Individual responses will not be shared with outside parties.**

Units for Sale		
Number of units for sale	No. of bedrooms per unit	at each price range
		\$
		\$
Units for Rent		
Number of units for rent	No. of bedrooms per unit	at each price range
		\$
		\$

**OWNER(S)**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 (Last, First, Middle Initial or Firm Name)

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

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

**DEVELOPER**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 (Last, First, Middle Initial or Firm Name)

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

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_