



Senate District 7 - ADU Accelerator Program | BIANNUAL PROGRESS REPORT

Biannual Progress Reports are due by January 1 and July 1. Reports will be filed with the Fiscal Agent, the Town of Danville at SD7.ADUProgram@danville.ca.gov (*electronic submission only*).

Name of Agency: _____

Reporting Period (select one):

- Through January 1, 2025
- January 2, 2025 - July 1, 2025
- July 2, 2025 - January 1, 2026
- January 2, 2026 - July 1, 2026
- July 2, 2026 - September 30, 2026

1. For the Reporting Period - Rebate (Incentive) Program

Total Funds Received for Rebate Program: \$ _____

a. ADU Production: Indicate number of units *permitted* (*under construction*)

| Unit Size | ADU Restriction Category | | Reserved Rebate (Amount) |
|----------------------|--------------------------|----------------|--------------------------|
| | Low-Income Restricted | Non-Restricted | |
| Less than 500 s.f. | | | |
| Less than 750 s.f. | | | |
| Less than 1,000 s.f. | | | |

b. ADU Production: Indicate number of units *finished* (ready for occupancy)

| Unit Size | ADU Restriction Category | | Issued Rebate (Amount) |
|----------------------|--------------------------|----------------|------------------------|
| | Low-Income Restricted | Non-Restricted | |
| Less than 500 s.f. | | | |
| Less than 750 s.f. | | | |
| Less than 1,000 s.f. | | | |

2. Total Units Produced since Program Inception

a. ADU Production: Indicate number of units *permitted* (under construction)

| Unit Size | ADU Restriction Category | | Reserved Rebate (Amount) |
|----------------------|--------------------------|----------------|--------------------------|
| | Low-Income Restricted | Non-Restricted | |
| Less than 500 s.f. | | | |
| Less than 750 s.f. | | | |
| Less than 1,000 s.f. | | | |

b. ADU Production: Indicate number of units *finished* (ready for occupancy)

| Unit Size | ADU Restriction Category | | Issued Rebate (Amount) |
|----------------------|--------------------------|----------------|------------------------|
| | Low-Income Restricted | Non-Restricted | |
| Less than 500 s.f. | | | |
| Less than 750 s.f. | | | |
| Less than 1,000 s.f. | | | |

3. Permit-Ready Prototype ADU Plans (if applicable)

a. Total Funds Received for Permit-Ready ADU Plans: \$ _____

b. Permit-Ready Plans Completed as of _____, as approved through City/Town Resolution No. _____ (attached).

I certify that the foregoing information associated with use of ADU Accelerator Program funds has been gathered and presented accurately on behalf of the City/Town of _____; and, that all funds are being utilized in accordance with the developed program guidelines.

City/Town of: _____

Name of City/Town Manager /
Duly Authorized Representative): _____

Signature: _____

Date: _____