2025 Housing Unit Survey

PLEASE READ ATTACHED INSTRUCTIONS. RETURN FORM BY January 17, 2025. Demographic Research Unit, Department of Finance, 915 L Street, Sacramento, CA 95814, Telephone (916)323-4086. Email Housing.Survey@dof.ca.gov.

Jurisdiction:	-		County:		
Contact Information Reported By:			Tral.		
Reported by.			Title:		
Department:		Address:			
Email Address:			Teleph	one Number:	
Section 1: Data Source 1. Please check the method you rep	orted on this surv	ey for newly co	nstructed unit	es:	
Completed Housing Units Certificates of Occupancy, OR				31/24 based on Final Inspec	tions,
		nits issued, you	MUST adjust	the permits to estimate com	pletions
Single Family U:	ling Unit permits i nit permits issued: nit permits issued:	7/1/23-6/30/2	4		
Section 2: Accessory Dwelling U 2.1. How many ADUs did your jur	isdiction gain?			2.2. How many ADU:	s did your jurisdiction
	ADU Detached	ADU Attached	Total		
Newly Constructed Units				Detached Units Lost:	
Converted Units Gained				Attached Units Lost:	
Non-Permitted Units Gained				Total:	
2.3. Of the reported ADUs gained a Affordable Units?		y were		total reported attached and were a result of wildfires?	detached ADUs lost,
Affordable ADUs Gained	l:			Wildfire Lost:	
Affordable ADUs Los	t:				
Section 3: Single Family Housi	ng Units				
3.1. How many Single Family Hou	sing Units did you	r jurisdiction g	ain?		
	Single Family Detached		e Family ached	Mobile Home	Total
Newly Constructed Units					
Converted Units Gained					
Non-Permitted Units Gained					

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3.2. How many Single Family Housing Un		risdiction lose ?			
	Single Family Detached	Single F Attac	amily hed Mol	oile Home	Total
Demolition, Fire, or other Natural Disaster					
Converted Units Lost					
Non-Permitted Units Lost					
3.3. Of the reported Single Family Housing	g Units gained	and lost , how m	any were Affordable U	Jnits?	
Affordable Single Family Units Gained	d:				
Affordable Single Family Units Los	st				
3.4. Of the reported Single Family Housing of wildfires?	g Units lost due	e to "Demolitions	s, Fire, or other Natur	al Disaster," hov	w many were a resul
Wildfire Los	st:				
Section 4: Multi-Family Housing Units 4.1. How many Multi-Family Housing Unit Note: Only add Units for the total not Structure.	• •	sdiction gain? r 4-plex Units	5+ U Structures	Units	Total Units
Newly Constructed Units					
Converted Units Gained					
Non-Permitted Units Gained					
4.2. How many Multi-Family Housing Ur	nits did your jui	risdiction lose?			
Note: Only add Units for the total not Stru		4-plex	5+ U	Inits	
Demolition, Fire, or other Natural Disaster	Structures	Units	Structures	Units	Total Units
Converted Units Lost					
Non-Permitted Units Lost					
4.3. Of the reported Multi-Family Housin		and lost , how m	any were Affordable	Units?	
Affordable Multi-Family Units Gaine	d:				
Affordable Multi-Family Units Lo	st:				

4.4. Of the reported Multi-Family Housing Units lost due to "Demolitions, Fire, or other Natural Disaster," how many were a result of wildfires?

Wildfire Lost:

2025 Housing Unit Change Form **Section 5: Annexations & Detachments** (Attach additional sheets if necessary) (Cities Only) Please select: LAFCO #: Annexation **Effective Date:** Detachment **Annexation Short Title:** Please report all existing Housing Units at the time of the effective date. Units Structures Units 2, 3, or 4-plex **Detached Single Family** 5+ Units **Attached Single Family Total** Mobile Home **Total** LAFCO #: Annexation Effective Date: Annexation Short Title: Detachment Please report all existing Housing Units at the time of the effective date. Units Structures Units 2, 3, or 4-plex **Detached Single Family** 5+ Units **Attached Single Family Total** Mobile Home **Total** Please select: LAFCO #: Annexation **Effective Date:** Detachment **Annexation Short Title:**

Please report all existing Housing Units at the time of the effective date.

Units Structures Units

2, 3, or 4-plex **Detached Single Family**

5+ Units **Attached Single Family**

> **Total** Mobile Home

> > **Total**

2025 Housing Unit Change Form

(Attach additional sheets if necessary)

Section 6: Civilian Group Quarter Changes

Facility Name: Address: Telephone Number:			
	ilian Group Quarter Change:	What was the total bed capacity?	
Annexed	Opened	1/1/24	
Detached	Closed	12/31/24	
Changed			
Facility Name:			
Address:			
Telephone Number:			
Please select the type of Civ	ilian Group Quarter Change:	What was the total bed capacity?	
Please select the type of Civ	ilian Group Quarter Change: Opened	What was the total bed capacity? 1/1/24	
Annexed	Opened	1/1/24	
Annexed Detached	Opened	1/1/24	
Annexed Detached	Opened	1/1/24	
Annexed Detached Changed	Opened	1/1/24	
Annexed Detached Changed Facility Name:	Opened	1/1/24	
Annexed Detached Changed Facility Name: Address: Telephone Number:	Opened	1/1/24	
Annexed Detached Changed Facility Name: Address: Telephone Number:	Opened Closed	1/1/24 12/31/24	
Annexed Detached Changed Facility Name: Address: Telephone Number: Please select the type of Civ	Opened Closed ilian Group Quarter Change:	1/1/24 12/31/24 What was the total bed capacity?	