



# CITY AND BOROUGH OF SITKA

## PLANNING AND COMMUNITY DEVELOPMENT DEPARTMENT GENERAL APPLICATION

- Applications must be deemed complete at least **TWENTY-ONE (21)** days in advance of next meeting date.
- Review guidelines and procedural information.
- Fill form out completely. No request will be considered without a completed form.
- Submit all supporting documents and proof of payment.

### APPLICATION FOR:

☐ VARIANCE☒ CONDITIONAL USE☒ ZONING AMENDMENT☐ PLAT/SUBDIVISION

### BRIEF DESCRIPTION OF REQUEST:

Marijuana Retail Store  
4509 HPR

### PROPERTY INFORMATION:

CURRENT ZONING: C2 PROPOSED ZONING (if applicable): C2

CURRENT LAND USE(S): Empty PROPOSED LAND USES (if changing): Retail

### APPLICANT INFORMATION:

PROPERTY OWNER: Burgess Bauder

PROPERTY OWNER ADDRESS: Box 277

STREET ADDRESS OF PROPERTY: 4509 HPR

APPLICANT'S NAME: Liza-Marty Martin

MAILING ADDRESS: Box 2752

EMAIL ADDRESS: ~~liza@akofarms.com~~ DAYTIME PHONE: 907-738-3484

AKO Farms LLC@gmail.com

Last Name

5.14.25  
Date Submitted

4509 HPR  
Project Address

## REQUIRED SUPPLEMENTAL INFORMATION:

### For All Applications:

- ☒ Completed General Application form
- ☐ Supplemental Application (Variance, CUP, Plat, Zoning Amendment)
- ☒ Site Plan showing all existing and proposed structures with dimensions and location of utilities
- ☒ Floor Plan for all structures and showing use of those structures
- ☐ Proof of filing fee payment
- ☐ Other: \_\_\_\_\_

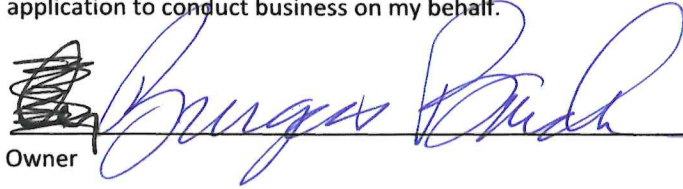
### For Marijuana Enterprise Conditional Use Permits Only:

- ☒ AMCO Application

### For Short-Term Rentals and B&Bs:

- ☐ Renter Informational Handout (directions to rental, garbage instructions, etc.)
- ☐ Documentation establishing property as primary residence (motor vehicle registration, voter registration, etc.)
- ☐ Signed Affidavit of Primary Residence for Short-term Rental Conditional Use Permit

**CERTIFICATION:** I hereby certify that I am the owner of the property described above and that I desire a planning action in conformance with Sitka General Code and hereby state that all of the above statements are true. I certify that this application meets SCG requirements to the best of my knowledge, belief, and professional ability. I acknowledge that payment of the review fee is non-refundable, is to cover costs associated with the processing of this application and does not ensure approval of the request. I understand that public notice will be mailed to neighboring property owners and published in the Daily Sitka Sentinel. I understand that attendance at the Planning Commission meeting is required for the application to be considered for approval. I further authorize municipal staff to access the property to conduct site visits as necessary. I authorize the applicant listed on this application to conduct business on my behalf.

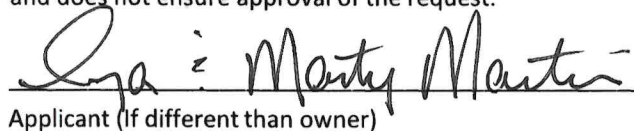
  
Owner

3/27/25  
Date

Owner

Date

I certify that I desire a planning action in conformance with Sitka General Code and hereby state that all of the above statements are true. I certify that this application meets SCG requirements to the best of my knowledge, belief, and professional ability. I acknowledge that payment of the review fee is non-refundable, is to cover costs associated with the processing of this application and does not ensure approval of the request.

  
Applicant (If different than owner)

3.26.2025  
Date

Last Name

Date Submitted

Project Address



## CITY AND BOROUGH OF SITKA

PLANNING AND COMMUNITY DEVELOPMENT DEPARTMENT  
SUPPLEMENTAL APPLICATION FORM  
CONDITIONAL USE PERMIT

### APPLICATION FOR ALL OTHER CONDITIONAL USE PERMITS (EXCLUDING SHORT-TERM RENTAL AND BED & BREAKFAST)

#### CRITERIA TO DETERMINE IMPACT – SGC 22.24.010(E) (Please address each item in regard to your proposal)

- Hours of operation: 8AM - 7PM
- Location along a major or collector street: ON OLD BARGE ROAD BELOW H.P.R. NEXT TO THE CRUISE TERMINAL PARKING LOT.
- Amount of vehicular traffic to be generated and impacts of the traffic on nearby land uses:  
VEHICLE TRAFFIC IS EXPECTED TO BE LIGHT WITH NO IMPACT ON TRAFFIC OR NEARBY LAND USES!
- Potential for users or clients to access the site through residential areas or substandard street creating a cut through traffic scenario: NONE - FENCED IN AREA.
- Effects on vehicular and pedestrian safety: WITH VEHICLE TRAFFIC EXPECTED TO BE LIGHT THERE SHOULD BE VERY LITTLE INTERACTION WITH PEDESTRIANS
- Ability of the police, fire, and EMS personnel to respond to emergency calls on the site: VERY OPEN WITH NO RESTRICTIONS ON RESPONSES.
- Describe the parking plan & layout: 4 PARKING SPACES OFF OF OLD BARGE ROAD. PARKING PLAN ATTACHED
- Proposed signage: AMCO - ALLOWS 1-SIGN OF 48"X48"-



- Presence of existing or proposed buffers (ie. Fences, boundary walls, natural barriers, etc.) on the site or immediately adjacent the site:

THE RETAIL BUILDING WILL BE PROTECTED BY A 8' FENCE AROUND THE SIDES & BACK OF BUILDING. FRONT WILL BE OPENED TO FOOT TRAFFIC.

- Amount of noise to be generated and its impacts on neighbors: DURING BUSINESS HOURS THERE WILL BE VOICES AND PEOPLE TALKING. THERE SHOULD BE VERY LITTLE NOISE CREATED.

- Other criteria that surface through public comments or planning commission review (odor, security, safety, waste management, etc):

THERE WILL BE ODORS CREATED BUT SHOULD BE MINIMAL AS THE WIND & WEATHER WILL EFFECT THE DIRECTION IT FLOWS. THE SITE WILL BE UNDER VIDEO SURVEILLANCE 24 HRS WILL MEET ALL OF AMCO'S RULES & REGULATIONS ON SECURITY, SAFETY. THE WASTE SHOULD BE MINIMAL AND WILL BE HANDLED IN A PROFESSIONAL MANNER. THAT MEETS AMCO'S RULES.

- Mitigation/ Management Plan (How will site be managed to ensure low/no impact on neighbors?)

THE AREA WILL BE FENCED IN, HOURS WILL BE EFFECTED BY THE CRUISE SHIP SCHEDULE.

THERE WILL BE PEOPLE MANNING THE STORE AND MAKING SURE ALL RULES ARE FOLLOWED.

**REQUIRED FINDINGS (SGC 22.30.160(C):**

1. The city may use design standards and other elements in this code to modify the proposal. A conditional use permit may be approved only if all of the following findings can be made regarding the proposal and are supported by the record that the granting of the proposed conditional use permit will not:

Initial

a. Be detrimental to the public health, safety, and general welfare;	mm
b. Adversely affect the established character of the surrounding vicinity; nor	mm
c. Be injurious to the uses, property, or improvements adjacent to, and in the vicinity of, the site upon which the proposed use is to be located.	mm
2. The granting of the proposed <u>conditional use</u> permit is consistent and compatible with the intent of the goals, objectives and policies of the <u>comprehensive plan</u> and any implementing regulation.	mm
3. All conditions necessary to lessen any impacts of the proposed use are conditions that can be monitored and enforced.	mm
4. The proposed use will not introduce hazardous conditions at the site that cannot be mitigated to protect adjacent properties, the vicinity, and the public health, safety and welfare of the community from such hazard.	mm
5. The <u>conditional use</u> will be supported by, and not adversely affect, adequate public facilities and services; or that conditions can be imposed to lessen any adverse impacts on such facilities and services.	mm
6. Burden of Proof. The <u>applicant</u> has the burden of proving that the proposed <u>conditional use</u> meets all of the criteria in subsection B of this section.	mm

**ANY ADDITIONAL COMMENTS** WE will make every effort  
to keep this area safe & sound. WE will  
also make every effort to satisfy any neighbor hood  
complaints or problems.

Pat f Pat  
Applicant

4/14/2025  
Date

MARTIN / Burgess  
Last Name

Date Submitted

4509 HAR  
Project Address