

# CITY AND BOROUGH OF SITKA

PLANNING AND COMMUNITY DEVELOPMENT DEPARTMENT GENERAL APPLICATION

<ul><li>of next meeting d</li><li>Review guideline</li><li>Fill form out com</li></ul>	of be deemed complete at le late. s and procedural information <u>pletelv</u> . No request will be o rting documents and proof	on. considered withou	a. 1944 A.C. contraints to have	
APPLICATION FOR:	☐ VARIANCE	CONDITIONA	L USE	
	☐ ZONING AMENDMENT	☐ PLAT/SUBDIV	ISION	
			shes to boold	
garage wit	h 2nd Floor	apartner	+ over it.	
				***************************************
PROPERTY INFORMAT	ION:			
		NG (if applicable):		
CURRENT LAND USE(S):	Idence PROPOS	ED LAND USES (if chang	ing):	
APPLICANT INFORMA				
	ecca Himscho			
PROPERTY OWNER ADDRESS: _	1507 DAVID	off 5t.		
STREET ADDRESS OF PROPERTY	: 1507 David	off st.		
APPLICANT'S NAME:	er Welland			
MAILING ADDRESS: 625	- Decrept st	· KALL	AK 99835	
EMAIL ADDRESS: Wellon	deposition . NE+	DAYTIME PHONE: _	907- 966-3315	

Last Name

Date Submitted

**Project Address** 

# REQUIRED SUPPLEMENTAL INFORMATION:

true. I certify that this application	meets SCG requirements to the best of my k review fee is non-refundable, is to cover cos	Date		
Owner  Owner  I certify that I desire a planning act true. I certify that this application acknowledge that payment of the and does not ensure approval of the Peters.	meets SCG requirements to the best of my k review fee is non-refundable, is to cover cos	Date  Date  e and hereby state that all of the above statements arknowledge, belief, and professional ability. I sts associated with the processing of this application		
Owner  Owner  I certify that I desire a planning act true. I certify that this application acknowledge that payment of the and does not ensure approval of the Peters.	meets SCG requirements to the best of my k review fee is non-refundable, is to cover cos	Date  Date  e and hereby state that all of the above statements are knowledge, belief, and professional ability. I sts associated with the processing of this application		
Owner  Cover I certify that I desire a planning act true. I certify that this application is acknowledge that payment of the	meets SCG requirements to the best of my k review fee is non-refundable, is to cover cos	Date  Date  Date  e and hereby state that all of the above statements are knowledge, belief, and professional ability. I		
Owner  Cover I certify that I desire a planning act true. I certify that this application is acknowledge that payment of the	meets SCG requirements to the best of my k review fee is non-refundable, is to cover cos	Date  Date  Date  e and hereby state that all of the above statements are knowledge, belief, and professional ability. I		
Owner  Certify that I desire a planning act true. I certify that this application is	meets SCG requirements to the best of my k	Date  Date  Date  e and hereby state that all of the above statements ar knowledge, belief, and professional ability. I		
Owner  Owner	ion in conformance with Sitka General Code	Date		
Rebecca Himschoot (Apr 13, 2024 17:35 AKDT)  Owner		Date		
Rebecca Himschoot (Apr. 13, 2024 17:35 AKDT)				
Rebecca Himschoot				
		13/04/24		
SCG requirements to the best of my non-refundable, is to cover costs as understand that public notice will be that attendance at the Planning Co	y knowledge, belief, and professional ability. ssociated with the processing of this applica be mailed to neighboring property owners a symmission meeting is required for the applicate property to conduct site visits as neces	ratements are true. I certify that this application meets. I acknowledge that payment of the review fee is ation and does not ensure approval of the request. I and published in the Daily Sitka Sentinel. I understand cation to be considered for approval. I further ssary. I authorize the applicant listed on this		
CERTIFICATION: I hereby certify that I am the owner of the property described above and that I desire a planning action in				
Signed Affidavit of Primar	ry Residence for Short-term Rental Condition	nal Use Permit		
	ng property as primary residence (motor veh			
	dout (directions to rental, garbage instructio	ons, etc.)		
For Short-Term Rentals and B&I	Bs:			
AMCO Application				
For Marijuana Enterprise Condi	tional Use Permits Only:			
Other:		_		
Proof of filing fee paymen	t			
Floor Plan for all structure	s and showing use of those structures			
Floor Blood for all structure	ing and proposed structures with dimension	s and location of utilities		
_				
Site Plan showing all existi	(Variance, CUP, Plat, Zoning Amendment)			
Site Plan showing all existi				

# General Applicant Himschoot

Final Audit Report

2024-04-14

Created:

2024-04-12

By:

Erika Knox (weilandconstruction@gci.net)

Status:

Signed

Transaction ID:

CBJCHBCAABAAMJ5DgRT7BFutDwF7hklUgDPvHnyuuU20

# "General Applicant Himschoot" History

- Document created by Erika Knox (weilandconstruction@gci.net) 2024-04-12 4:56:45 PM GMT- IP address: 24.237.119.187
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### 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)

CF	RITERIA TO DETERMINE IMPACT — SGC 22.24.010(E) (Please address each item in regard to your proposal)
•	Hours of operation: Provide Rebecca with a place to stay
	when she's not traveling
-	when she's not traveling
•	Location along a major or collector street: Street is not a thru Road
•	Amount of vehicular traffic to be generated and impacts of the traffic on nearby land uses:
	normal traffic for the addition of one can
	and normal amount of extra visitors
•	Potential for users or clients to access the site through residential areas or substandard street creating a cut through traffic scenario:
	in the Front of the property just off the road
•	Effects on vehicular and pedestrian safety:
	no obstructions to Line of site.
•	Ability of the police, fire, and EMS personnel to respond to emergency calls on the site:
	no adverse effect
•	Describe the parking plan & layout: 6 Spots (3 Spots in a
	proposed signage: 10 new signs
•	Proposed signage: 10 New Signs
Las	t Name Date Submitted Project Address

	immediately adjacent the site:
	There is a fence between lots on the
	There is a fence between lots on the upland side of property
	Amount of noise to be generated and its impacts on neighbors: <u>No entre</u> <u>Noise</u>
•	Other criteria that surface through public comments or planning commission review (odor, security, safety, waste management, etc):
	Mitigation/ Management Plan (How will site be managed to ensure low/no impact on neighbors?)

Date Submitted

Last Name

Project Address

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

Last Name

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

	initiai			
a. Be detrimental to the public health, safety, and general welfare;				
b. Adversely affect the established character of the surrounding vicinity; nor	-			
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.				
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.				
3. All conditions necessary to lessen any impacts of the proposed use are conditions that can be monitored and enforced.				
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.				
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.				
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.				
ANY ADDITIONAL COMMENTS				
Applicant Date				

Date Submitted

**Project Address**