



# 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: SHORT TERM RENTAL

#### PROPERTY INFORMATION:

CURRENT ZONING: R1 PROPOSED ZONING (if applicable): \_\_\_\_\_

CURRENT LAND USE(S): \_\_\_\_\_ PROPOSED LAND USES (if changing): \_\_\_\_\_

#### APPLICANT INFORMATION:

PROPERTY OWNER: Tim W Lobdell

PROPERTY OWNER ADDRESS: 1301R HPR Sitka AK 99835

STREET ADDRESS OF PROPERTY: 1301A HPR Sitka AK

APPLICANT'S NAME: Tim W Lobdell

MAILING ADDRESS: 1301B HPR Sitka AK

EMAIL ADDRESS: Lucky Lobdells@gmail.com DAYTIME PHONE: 907 623-8375

Lobdell

Last Name

11/19/20

Date Submitted

1301A HPR Sitka 99835

Project Address

**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;	T.L.
b. Adversely affect the established character of the surrounding vicinity; nor	T.L.
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.	T.L.
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.	T.L.
3. All conditions necessary to lessen any impacts of the proposed use are conditions that can be monitored and enforced.	T.L.
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.	T.L.
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.	T.L.
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.	T.L.

**ANY ADDITIONAL COMMENTS** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tim W Lobdell  
Applicant

11/19/20  
Date

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

PRIVACY Fence around north side of house

- Amount of noise to be generated and its impacts on neighbors: MINIMAL

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

NA Municipal TRASH pick up every Thursday

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

OWNER ON site PROFESSIONALLY MAINTAINED





# CITY AND BOROUGH OF SITKA

## PLANNING AND COMMUNITY DEVELOPMENT DEPARTMENT SUPPLEMENTAL APPLICATION FORM CONDITIONAL USE PERMIT

### APPLICATION FOR

☐ MARIJUANA ENTERPRISE

☒ SHORT-TERM RENTAL OR BED AND BREAKFAST

☐ OTHER: \_\_\_\_\_

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

- Hours of operation: 24/7
- Location along a major or collector street: HPR
- Amount of vehicular traffic to be generated and impacts of the traffic on nearby land uses:  
likely 1 to 2 cars 4 car parking
- Potential for users or clients to access the site through residential areas or substandard street creating a cut through traffic scenario: NO NA
- Effects on vehicular and pedestrian safety: No
- Ability of the police, fire, and EMS personnel to respond to emergency calls on the site: yes
- Describe the parking plan & layout: across front of house 60' by 16'  
parking lot
- Proposed signage: 2 sq ft sign with 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.)

**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.

Jim & Lode  
Owner

11/19/20  
Date

Cheryl Lode  
Owner

11/21/20  
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.

NA  
Applicant (If different than owner)

\_\_\_\_\_  
Date

Lode  
Last Name

\_\_\_\_\_  
Date Submitted

1301A HPR SITKA AK  
Project Address 99835