

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: _____

PROPERTY INFORMATION:

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

CURRENT LAND USE(S): _____ PROPOSED LAND USES (if changing): _____

APPLICANT INFORMATION:

PROPERTY OWNER: _____

PROPERTY OWNER ADDRESS: _____

STREET ADDRESS OF PROPERTY: _____

APPLICANT'S NAME: _____

MAILING ADDRESS: _____

EMAIL ADDRESS: _____ DAYTIME PHONE: _____

Last Name

Date Submitted

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.)

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

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.

Adam Olson

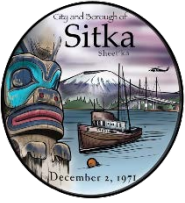
Applicant (If different than owner)

Date

Last Name

Date Submitted

Project Address



CITY AND BOROUGH OF SITKA
 PLANNING AND COMMUNITY DEVELOPMENT DEPARTMENT
 SUPPLEMENTAL APPLICATION FORM
 PLAT APPLICATION

APPLICATION FOR

- MAJOR SUBDIVISION/PLANNED UNIT DEVELOPMENT
- MINOR SUBDIVISION/HYBRID SUBDIVISION
- SUBDIVISION REPLAT/LOT MERGER/EASEMENT AMENDMENT
- BOUNDARY LINE ADJUSTMENT

ANALYSIS: (Please address each item in regard to your proposal)

- **SITE/DIMENSIONS/TOPOGRAPHY:** _____

- **EXISTING UTILITIES AND UTILITY ROUTES:** _____

- **PROPOSED UTILITIES AND UTILITY ROUTES:** _____

- **ACCESS, ROADS, TRANSPORTATION, AND MOBILITY:** _____

- **IMPACT OF PROPOSAL ON ANY EXISTING EASEMENTS:** _____

- **PUBLIC HEALTH, SAFETY, AND WELFARE:** _____

- **ACCESS TO LIGHT AND AIR:** _____

• **ORDERLY AND EFFICIENT LAYOUT AND DEVELOPMENT:** _____

• **DESCRIBE ALL EXISTING STRUCTURES, THEIR USE, AND PROXIMITY TO PROPOSED PROPERTY LINES:**

• **EXISTENCE OF ANY ENCROACHMENTS:** _____

• **AVAILABILITY OF REQUIRED PARKING:** _____

• **SUMMARY OF PROPOSED EASEMENT AGREEMENTS OR COVENANTS:** _____

ANY ADDITIONAL COMMENTS _____

Applicant

Date

Last Name

Date Submitted

Project Address