CITY AND BOROUGH OF SITKA PLANNING DEPARTMENT

SHORT-TERM RENTAL &
BED & BREAKFAST
ANNUAL REPORT

DUE: April 20, 2017

APPLICANT'S Name: (BOSWA)
PHONE NUMBER: 752-15464
MAILING ADDRESS: POBOX 6005
OWNER'S NAME:
(If different from applicant)
REGISTRED NAME OF BUSINESS WITH SALES TAX: LING Red HUTE
PHONE NUMBER: Swe
MAILING ADDRESS:
PROJECT ADDRESS: 629 Depost Street.
LEGAL DESCRIPTION Lot: 5 Block:
Subdivision: Arend Pirchust twenty Plat. 29
U.S. Survey: Zoning Classification: R-
Date of Planning Commission approval:
Date of activation of the conditional use permit: Spring. 2015 (?)
Number of nights a room in the bed and breakfast or short-term rental has been rented during the last 12 months:
Number of nights of bed taxes reported to the City of Sitka's Sales Tax Department:
SIGNATURE OF APPLICANT: DATE: 3/27/)
SIGNATURE OF OWNER: DATE:
(If different from applicant)