

CITY AND BOROUGH OF SITKA  
PLANNING DEPARTMENT  
SHORT-TERM RENTAL &  
BED & BREAKFAST APPLICATION

Short-Term Rental Fee	\$100.00
Bed & Breakfast Fee (per Guestroom)	\$35.00
* plus current city sales tax *	

APPLICANT'S NAME: Matthew & Sidney Kinney  
PHONE NUMBER: 907 738 1614 / 907 299 7373  
MAILING ADDRESS: 103 Kramer Ave

OWNER'S NAME: \_\_\_\_\_  
(If different from applicant)  
PHONE NUMBER: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_

PROJECT ADDRESS: 103 Kramer Ave  
LEGAL DESCRIPTION Lot: Lot A Block: \_\_\_\_\_  
Subdivision: Horvath Subdivision  
U.S. Survey \_\_\_\_\_ Zoning Classification: \_\_\_\_\_

☐ State all reasons justifying request: Increase affordable rental options and grow spending in other areas by providing affordable options of independent travelers as well as increase potential revenue. Streams to our own personal income.

☐ Describe how the facility will be operated, what meals will be served, and how guests will be transported. (This information may be provided on a separate sheet).  
Will operated as a short term rental, no meals will be served and guests will be responsible for their own transportation.

☐ Anticipated start date: May 2020

☐ What months of the year the facility will be in operation: April - Sept

☒ Drawing of the **interior** layout showing:

1. Size and location of rooms
2. Types of facilities in the rooms
3. Windows and exits
4. Location of smoke alarms and fire extinguishers
5. Guestrooms specifically delineated on the plans

☐ Drawing of the **exterior** site plan showing:

1. Dimensions of the home
2. How the house sits on the lot
3. Location of parking

☐ Check if facility is not fully constructed at the time of the application.

☒ Check if Life Safety Inspection has already been completed. If not, please contact the Building Department at 747-1832 to schedule an appointment. This Inspection is to certify that the residence complies with life and fire safety code aspects.

*In applying for and signing this application, the property owner hereby grants permission to Municipal staff to access the property before and after Planning Commission's review for the purposes of inspecting the proposed and/or approved structures.*

SIGNATURE OF APPLICANT:

*Sidney Kinney*

DATE:

*10/3/19*

SIGNATURE OF OWNER:

*[Signature]*

DATE:

*10/3/19*

*(If different from applicant)*

# INSPECTION REPORT

CITY AND BOROUGH OF SITKA BUILDING DEPARTMENT

100 LINCOLN STREET

SITKA, ALASKA 99835

PHONE: 747-1804 FAX: 747-3158

www.cityofsitka.com

DATE 9-27-19  
TIME 9:15

## TYPE OF INSPECTION

☐ EXCAVATION

☐ FOOTING

☐ UNDERSLAB

(PLUMBING/ELECTRICAL)

☐ STEM WALLS

☐ FRAME

☐ ELECTRICAL

☐ PLUMBING

☐ VAPOR RETARDER

☒ FIRE & LIFE SAFETY

☐ FINAL

☐ \_\_\_\_\_

OWNER SIDNEY KINNEY

ADDRESS 103 KRAMER

Fire + Life Safety inspection for

Short-term Rental - OK

~ NO DEFICIENCIES NOTED ~

☒ COPY PROVIDED TO SIDNEY

INSPECTOR [Signature]

☐ CALL FOR REINSPECTION  
BEFORE CONCEALMENT

☐ CORRECTIONS OR ITEMS NOTED ABOVE WILL BE  
REINSPECTED AT TIME OF NEXT CONSECUTIVE INSPECTION