

## 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 <u>completely</u>. No request will be considered without a completed form.
Submit all supporting documents and proof of payment.

| APPLICATION FOR:  | ☐ VARIANCE         | CONDITIONAL   | CONDITIONAL USE    |  |  |  |  |  |  |
|---|--------------------|---------------|--------------------|--|--|--|--|--|--|
|   | ☐ ZONING AMENDMENT | ☐ PLAT/SUBDIV | ISION              |  |  |  |  |  |  |
|   |                    |               |                    |  |  |  |  |  |  |
| BRIEF DESCRIPTION OF REQUEST: SHORT TEAM REQUEST AT 1935                  |                    |               |                    |  |  |  |  |  |  |
| DODGE CIRCLE. WE  | HAVE AN EFF        | HUENLY APARTM | ENT THAT WE'D LIKE |  |  |  |  |  |  |
| TO SHORT TERM RENT.   |                    |               |                    |  |  |  |  |  |  |
|   |                    |               | <i>t</i> .         |  |  |  |  |  |  |
|   |                    |               |                    |  |  |  |  |  |  |
| PROPERTY INFORMATION:   |                    |               |                    |  |  |  |  |  |  |
|   |                    |               |                    |  |  |  |  |  |  |
| CURRENT LAND USE(S):PROPOSED LAND USES (if changing):                     |                    |               |                    |  |  |  |  |  |  |
|   |                    |               |                    |  |  |  |  |  |  |
|   |                    |               |                    |  |  |  |  |  |  |
| APPLICANT INFORMAT  | ION:               |               |                    |  |  |  |  |  |  |
| PROPERTY OWNER: KRUS  | PEARSON            |               |                    |  |  |  |  |  |  |
| PROPERTY OWNER ADDRESS: 1935 DOUGE CIRCLE                                 |                    |               |                    |  |  |  |  |  |  |
| STREET ADDRESS OF PROPERTY: 1935 DODGE CIRCLE 'B'                         |                    |               |                    |  |  |  |  |  |  |
| APPLICANT'S NAME: KAS PEARSON   |                    |               |                    |  |  |  |  |  |  |
| MAILING ADDRESS: 1935   | DODGE CIRCLE       |               |                    |  |  |  |  |  |  |
| EMAIL ADDRESS: Kri's emarble construction not DAYTIME PHONE: 907-738-3000 |                    |               |                    |  |  |  |  |  |  |
|   |                    |               |                    |  |  |  |  |  |  |
|   |                    |               |                    |  |  |  |  |  |  |

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|------|-----|
| 1100 | Ci  |
|      | IRS |

12/16/20

1935 DODGE CIRCLE 'B'

## 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 lo   | ocation 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 General Code and hereby state that all of the above statements are true. I certify that the best of my knowledge, belief, and professional ability. I acknowledge that payment cover costs associated with the processing of this application and does not ensure appropriate will be mailed to neighboring property owners and published in the Daily Sitkate Planning Commission meeting is required for the application to be considered for appropriate to conduct site visits as necessary. I authorize the applicant listed behalf.  Owner | t this application meets SCG requirements to<br>nt of the review fee is non-refundable, is to<br>proval of the request. I understand that public<br>Sentinel. I understand that attendance at the<br>proval. I further authorize municipal staff to |
| Owner   | Date  |
| I certify that I desire a planning action in conformance with Sitka General Code and he true. I certify that this application meets SCG requirements to the best of my knowled acknowledge that payment of the review fee is non-refundable, is to cover costs asso and does not ensure approval of the request.  | dge, belief, and professional ability. I  |
| Applicant (If different than owner)   | Date  |
|   |   |

Last Name

Date Submitted

**Project Address** 

1935 DODGE CIRCLE 'B'

# Sitka Sitka

# CITY AND BOROUGH OF SITKA

PLANNING AND COMMUNITY DEVELOPMENT DEPARTMENT SUPPLEMENTAL APPLICATION FORM CONDITIONAL USE PERMIT

| Drevaler 2, 1971                           |  |
|--|--|
| APPLICATION FOR                            | ☐ MARIJUANA ENTERPRISE .   |
|  | SHORT-TERM RENTAL OR BED AND BREAKFAST   |
|  | □ OTHER:   |
| CRITERIA TO DETERN                         | IINE IMPACT — SGC 22.24.010(E) (Please address each item in regard to your proposal)   |
| <ul><li>Hours of operation: _</li></ul>    | APARTMENT WILL BE FOR PESIDENTIAL USE AND WILL   |
| BE IN USE ACTION                           | DINGLY   |
| <ul> <li>Location along a major</li> </ul> | or or collector street: 1935 DOUGE CIRCLE  |
| Amount of vehicular t                      | traffic to be generated and impacts of the traffic on nearby land uses:  |
| VERY MINIMAL                               | AMOUNT OF TRAFFIC, NO IMPACT TO TRAFFIC. THIS APACINGNET   |
| HAS BOEN A                                 | MONTH TO MONTH AND HAS HAD A TENANT SINCE 2006.  |
|  | clients to access the site through residential areas or substandard street creating a cut io: APARTMENT IS SERVICED BY DONSE CIPLLE AND IS |
| THE ONLY A                                 | aces Paint.  |
| Effects on vehicular a                     | nd pedestrian safety: None.  |
|  |  |
| Ability of the police, f                   | ire, and EMS personnel to respond to emergency calls on the site: 100% EGPESS  |
| TO APARTMENT                               | FROM DODGE CIPCLE.   |
| Describe the parking                       | plan & layout: DNE PARKING SPOT, DFE-STREET IN EXISTING  |
| DRIVEWAY.                                  |  |
| <ul> <li>Proposed signage:</li> </ul>      | None   |
|  |  |

| Pears     | som |
|-----------|-----|
| Last Name |     |

| moren              | IS FENCED ON THREE SIMES."   |
|--------------------|--|
| 11-10-11           | I TOUCH OF IMPER SINCE   |
|                    |  |
|                    |  |
| Amount of noise    | e to be generated and its impacts on neighbors: REGULAR NORMAL TENANT  |
| GENERATEN          | NOISE. NO MORE THAN CHERENT LONG TERM TENANT GRE   |
|                    | TOUR OF THE PROPERTY OF THE PR |
| Yeansylustrasistem |  |
|                    |  |
| Other criteria th  | nat surface through public comments or planning commission review (odor, security, sa  |
| vaste managem      |  |
| 7                  |  |
| KESIJENCE          | ALPEADY HAS ITS OWN GARBAGE RECEPTALLS.  |
|                    |  |
|                    |  |
|                    |  |
|                    |  |
|                    |  |
|                    |  |
|                    |  |
|                    |  |
|                    |  |
|                    |  |
|                    |  |
| /litigation/ Mai   | nagement Plan (How will site be managed to ensure low/no impact on neighbors?)   |
| × • ×              |  |
| WE UIL             | PESTRICT GUESTS TO (2) TOTAL AT MUY ONE TIME AND   |
| multy -aut//       | 1) VEHICLE PER STAY. THIS IS IN LINE WITH CHERENT  |
|                    |  |
| . 0.               | <u>/ ·                                     </u>  |
| bccura NCY         |  |
| bccur4 NCY         |  |
| bccur4 NCY         |  |
| bccura ncy         | Δ  |
| becuvancy          |  |

Pearson

Dec. 15,2020

1935 Dadge Cir.

#### 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 <u>conditional</u> <u>use</u> 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 <u>conditional use</u> permit <u>will not</u>:

Initial

| a. Be detrimental to the public health, safety, and general welfare;   | 140 |
|--|-----|
| Adversely affect the established character of the surrounding vicinity; nor  | KP  |
| e. 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.   | R   |
| 2. The granting of the proposed conditional use permit is consistent and compatible with the intent  |     |
| of the goals, objectives and policies of the comprehensive plan and any implementing regulation.   | KP  |
| 3. All conditions necessary to lessen any impacts of the proposed use are conditions that can be monitored and enforced.   | 14  |
| 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. | 10  |
| 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.  | JaP |
| 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.   | KP  |

| ANY     | ADDIT | IONAL  | . com | <b>IMENTS</b>                  | WE AG   | E REC | MESTING | A        | CUP TE  | > Alla | Jus | > TO        |
|---------|-------|--------|-------|--------------------------------|---------|-------|---------|----------|---------|--------|-----|-------------|
|         |       |        |       |                                | FOR     |       |         |          |         |        |     |             |
|         |       |        |       |                                | OF THE  |       |         |          |         |        |     |             |
|         |       |        |       |                                | WILL BE |       |         |          |         |        |     |             |
|         | 1     |        |       |                                |         |       |         |          |         |        |     |             |
|         | fluf  | Jacko  | 1     |                                |         |       |         |          | 12/5/   | 70     |     |             |
| Applica | hx )  | 201-04 | -     | 111-111-30-31 <del>1-330</del> |         |       |         | <br>Date | 1 2/13/ |        |     | <del></del> |

PEARSON

12/15/20

1935 DODGE CIRCLE