

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: Subdivision from one lot to two lots at 230 and 232 Lance Dr.

PROPERTY INFORMATION:

CURRENT ZONING: R-2 PROPOSED ZONING (if applicable): _____

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

APPLICANT INFORMATION:

PROPERTY OWNER: Hard shot Enterprises LLC / Todd Fleming

PROPERTY OWNER ADDRESS: 1107 B Edgumbe Drive

STREET ADDRESS OF PROPERTY: 230 / 232 Lance Dr.

APPLICANT'S NAME: Todd Fleming

MAILING ADDRESS: 1107 B Edgumbe Dr., Sitka, AK. 99835

EMAIL ADDRESS: Tflemingak@gmail.com DAYTIME PHONE: 907.738.3355

Fleming

1-22-21

230/232 Lance Dr.

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.

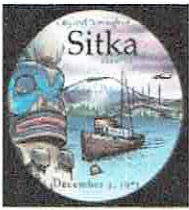
Tom Fleming for Hand shot Ent. LLC 1-22-21
Owner Date

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.

Tom Fleming 1-22-21
Applicant (If different than owner) Date

Fleming 1-22-21 230/232 Lance Dr.
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: See plat

- EXISTING UTILITIES AND UTILITY ROUTES: _____

- PROPOSED UTILITIES AND UTILITY ROUTES: See plat

- ACCESS, ROADS, TRANSPORTATION, AND MOBILITY: Parking areas are established

- IMPACT OF PROPOSAL ON ANY EXISTING EASEMENTS: N/A

- PUBLIC HEALTH, SAFETY, AND WELFARE: Good

- ACCESS TO LIGHT AND AIR: Good

Fleming
Last Name

1-22-21
Date Submitted

230/232 Lance Dr.
Project Address

• ORDERLY AND EFFICIENT LAYOUT AND DEVELOPMENT: Yes

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

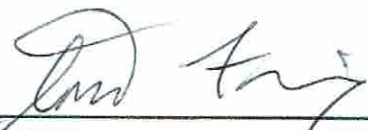
Two four plexes, see as built for location

• EXISTENCE OF ANY ENCROACHMENTS: No

• AVAILABILITY OF REQUIRED PARKING: Yes currently satisfactory

• SUMMARY OF PROPOSED EASEMENT AGREEMENTS OR COVENANTS: N/A

ANY ADDITIONAL COMMENTS _____


Applicant

1-22-21
Date

<u>Fleming</u>	<u>1-22-21</u>	<u>203/232 Lance dr.</u>
Last Name	Date Submitted	Project Address