

Last Name

### **CITY AND BOROUGH OF SITKA**

PLANNING AND COMMUNITY DEVELOPMENT DEPARTMENT GENERAL APPLICATION

			PICKETT, THE WAY STORY OF	1 150, (4)
of next meeting Review guideling Fill form out con	ist be deemed complete at date. es and procedural informa npletely. No request will be orting documents and proc	tion. e considered witho	ş 1.	
APPLICATION FOR:	☐ VARIANCE		AL USE	
	☐ ZONING AMENDMENT	☐ PLAT/SUBDIV	/ISION	
BRIEF DESCRIPTION (	OF REQUEST: Am	requesting	to use mi	2 22 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
home and pr	operty as a li	censed days	ave, servit	ig lep to
8 children	operty as a li	etween M	onday and	Friday.
PROPERTY INFORMA  CURRENT ZONING: R-1  CURRENT LAND USE(S):	LDMH proposed zo residential propo	NING (if applicable): OSED LAND USES (if chan	ging):	\$ 36° J.
STREET ADDRESS OF PROPERT APPLICANT'S NAME: Ka	Michael Coleman 2820 Sawmi ry: 2840 Sawm	II CK-Rd.  III CK. Rd.  Rd.	907. 738. 32(	00
Coleman	5/25/21		2840 SI	<u></u>

**Date Submitted** 

**Project Address** 

#### **REQUIRED SUPPLEMENTAL INFORMATION:**

or All Applications:		
Completed General Application for	m	
Supplemental Application (Variance		
Site Plan showing all existing and pr		
Floor Plan for all structures and sho		
Proof of filing fee payment		
Other:	*	
For Marijuana Enterprise Conditional U	se Permits Only:	
AMCO Application		
For Short-Term Rentals and B&Bs:	704 B	
Renter Informational Handout (dir	ections to rental, garbage instruct	tions, etc.)
CERTIFICATION:	E-0	10 M
cover costs associated with the processing notice will be mailed to neighboring proper planning Commission meeting is required f	of this application and does not e rty owners and published in the D for the application to be considere	at payment of the review fee is non-refundable, is to ensure approval of the request. I understand that public baily Sitka Sentinel. I understand that attendance at the ed for approval. I further authorize municipal staff to cant listed on this application to conduct business on my
Owner / 1		Date
at klim	at the state of th	5-24-71
Owner		Date
true I certify that this application meets SC	CG requirements to the best of m fee is non-refundable, is to cover	ode and hereby state that all of the above statements are by knowledge, belief, and professional ability. It costs associated with the processing of this application $\frac{5-25-21}{\text{Date}}$
Coleman	5/25/21	2840 SMC
Last Name	Date Submitted	Project Address

## Sitka Sitka December 1, 191

#### CITY AND BOROUGH OF SITKA

PLANNING AND COMMUNITY DEVELOPMENT DEPARTMENT SUPPLEMENTAL APPLICATION FORM CONDITIONAL USE PERMIT

APPLICATION FOR	MARIJUANA ENTERPRISE	· · · · · · · · · · · · · · · · · · ·
	SHORT-TERM RENTAL OR BED AND BREAKFA	ST
	Daycare Daycare	Part Specific Control of the Control
	7 O 11/2 III.	
	INE IMPACT - SGC 22.24.010(E) (Pleas	
• Hours of operation: _	I don't carry general oper	and close hours, but
	children between 7am a	
• Location along a majo	or or collector street: My house is a	pproximately 100 ft off of
Sawmill CK. Roa	id, and the outdoor play are	ea is approx. 75-80ft off of SM(
	traffic to be generated and impacts of the tra	
Between N	Monday - Friday, approximately	3-5 vehicles (belonging
to parents) u	vill pull into my driveway for searly	r drap-off/pick-ups, twice perday
<ul> <li>Potential for users or</li> </ul>	clients to access the site through residential	areas or substandard street creating a cut
through traffic scenar	io: There is only one way	16 get 10 pag resise
(through dri	reway) so there is zero poter	ntial for cut through traffic scenario
	The same of the sa	and the second of the second o
<ul> <li>Effects on vehicular ar</li> </ul>	nd pedestrian safety: Since the pick	-up/ arop-off ewea is in
my driveway a	nd away from SMC Rd., th	ere is little to no effect vehicular and pedestrian safe
		•
	ire, and EMS personnel to respond to emerge	
Police Fire EMS	have lots of space to respon	and to emergency calls on site.
	olan & layout: Parents/guardians c	
where there is	3-4 parking spaces, or be t connects my dad's house	low my driveway in the
empty lot tha	t connects my dad's house	e to my house.
<ul> <li>Proposed signage:</li> </ul>		
1 don't	intend on having	a sign.
		_
Coleman	5-25-21	2840 SMC
Last Name	Date Submitted	Project Address

Last Name

# 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;	&c
b. Adversely affect the established character of the surrounding vicinity; nor	&c
c. 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.	kc
2. The granting of the proposed <u>conditional use</u> permit is consistent and compatible with the intent of the goals, objectives and policies of the <u>comprehensive plan</u> and any implementing regulation.	KC
3. All conditions necessary to lessen any impacts of the proposed use are conditions that can be monitored and enforced.	RC
4. 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.	KC
<ol> <li>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.</li> </ol>	*C
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.	kc

ANY ADDITIONAL COMMENTS	N/A
	-
	0
Laycie Coleman	$\frac{5/25/21}{\text{Date}}$

Coleman

5/25/21

2840 SMC

st Name

Date Submitted

**Project Address**