

600010
Customer Number
20-058
Permit Number



Ketchikan Gateway Borough  
**Permit Application**

2020-09-24
Approved By
<input type="checkbox"/> NEW ELECTRIC METER

**Applicant Information**

<b>Owner</b>	BRANNON HENRY F & KATHY L	<b>Second Owner</b>	
<b>Mailing Address</b>	PO BOX 9150; KETCHIKAN AK; 99901		
<b>Applicant</b>	BRANNON HENRY F & KATHY L	<b>Relationship</b>	
<b>Phone Number</b>		<b>Work Number</b>	
<b>Email Address</b>		<input type="checkbox"/> Contact By Email Preferred	

**Existing Property Information**

<b>Property Address</b>	BEAR CLAN ST 2707	<b>Zoning</b>	RM
<b>Deed Description</b>	LOT 2, BLOCK 3, LOCATED IN THE TOWNSITE OF SAXMAN, ALASKA, AS SHOWN ON THE OFFICIAL PLAT OF U.S. SURVEY 1652, KETCHIKAN RECORDING DISTRICT, FIRST JUDICIAL DISTRICT, STATE OF ALASKA.		
<b>Lot</b>	002	<b>Block</b>	003
<b>Survey</b>	1652		
<b>Assessor's Parcel Number</b>	852140063000	<b>Plat Number</b>	

**Proposed Project Information**

**Permit Expires**

<b>Land Use Description</b>	Case 20-058 is a request for a conditional use permit (CUP) for a tax exempt use to stage emergency supplies on Lot 2, Block 3, USS 1652; a vacant lot located at 2707 Bear Clan Street, City of Saxman.	<b>TOTAL PARKING SPACES PROVIDED</b>	
<b>Conditions</b>			

- ZPNR
- ZONING PERMIT: NEW BUILDING
- ZONING PERMIT: NEW USE ONLY
- ZONING PERMIT: MOBILE BUILDING
- CORRESPONDENCE
- TEMPORARY ZONING PERMIT
- SIGN PERMIT

**THE BELOW APPLICATION(S) ARE REQUIRED:**

- CITY BUILDING PERMIT
- ADEC APPROVAL
- ADOT DRIVEWAY PERMIT
- KGB UTILITY HOOKUP
- WATER
- SEWER
- SDC FEE



# Ketchikan Gateway Borough

1900 First Ave. STE 126, Ketchikan, Alaska 99901 907.228.6610 office : 907.228.6698 fax

## CONDITIONAL USE PERMIT APPLICATION

Date Received

**RECEIVED**  
 AUG 25 2020  
 GATEWAY BOROUGH PLANNING DEPT  
 BY:   
 Application Complete

### TO BE COMPLETED BY PLANNING STAFF

Customer Number  Parcel Number  Case Number

Zoning District  Overlay Zone

### TO BE COMPLETED BY THE APPLICANT (PLEASE PRINT OR TYPE)

Applicant Name  Project Name  Contact Number

CONDITIONAL USE PERMIT       CONDITIONAL USE PERMIT RENEWAL

FOR THE PROPERTY LOCATED AT:

Existing Use(s) of the Property:

Proposed Project and/or Use(s) of the Property:  
Briefly describe the requested use and/or project

The proposed project for this property is for the establishment of a secure site for the stocking and distribution of 'Emergency Supplies' for the purpose of COVID-19 community spread mitigation within the Saxman community.

The site will have one 40' Conex placed for the storage of the emergency supplies. A secondary Conex and a potential "tiny home" are currently being explored for consideration at the property. The additional structures are funding dependent.

Potential Impacts of the use to surrounding properties:  
Describe what someone might experience on your site.

Example: Piles of rocks; noise from trucks or equipment; dust or fumes, etc.

Potential Impacts to surrounding properties include:  
Noise and dust during the foundation preparation  
Noise during the staging of Conex/Containers  
Noise during erection of any additional structures  
Noise during the stocking and distribution of Emergency Supplies

### Application Checklist

- Completed Zoning Permit Application
- Owner/Applicant Authorization Form



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## Owner Authorization

Project Name OVS Emergency Supplies Staging Site

Date Received



I certify that I am the legal owner or otherwise authorized\* to sign on behalf of the legal owner. I certify that I have read and understand the information contained within the submitted application and the application is true and correct to the best of my knowledge. I authorize the Borough the limited right of entry to the subject property for the purpose of conducting investigations related to the application. I understand that knowingly providing false information on this application may result in any action taken hereon being declared null and void. I further understand that pursuant to AS 11.56.210, knowingly making a material false statement, or otherwise providing false information, with the intent to mislead a public servant in the performance of his/her duty is punishable as a Class A misdemeanor.

Application Type Conditional Use Permit

**Primary Owner:**  check if primary contact

**Secondary Owner:**  check if primary contact

Name: Henry Brannon

Name: Kathy Brannon

Signature: [Handwritten Signature]

Signature: [Handwritten Signature]

Company: \_\_\_\_\_

Company: \_\_\_\_\_

Primary Phone: 907-617-7329

Primary Phone: \_\_\_\_\_

E-mail: quietlife@kpunet.net

E-mail: \_\_\_\_\_

### APPLICANT CONTACT INFORMATION check if primary contact

Contract Purchaser\*  Authorized Agent\*  Person with Demonstrated Possessory Interest in the Property\*

Name: Lee Wallace

Signature: [Handwritten Signature]

Company and/or Title: Organized Village of Saxman

Mailing Address: RT2 Box 2

City: Saxman

State: Alaska

Zip: 99901

Primary Phone: 907-247-2502

E-mail: iragovt@kpunet.net

\* I understand that I must provide the appropriate documentation to prove that I am a contract purchaser / authorized agent / person with demonstrated possessory interest in the subject property. Planning staff may photocopy the document to accompany the application.

STAFF USE ONLY: Staff verification of necessary documentation. Staff, initial and indicate document verified.

Copy Retained



# Ketchikan Gateway Borough

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## ZONING PERMIT APPLICATION

Date Received

**RECEIVED**  
 AUG 25 2020  
 GATEWAY BOROUGH PLANNING DEPT  
 BY: *[Signature]*

Application Complete

### TO BE COMPLETED BY PLANNING STAFF

Customer Number  Parcel Number  Permit Number

Zoning District  Overlay Zone

New Address being assigned:

Staff Notes:

Approved by: (Zoning Official) \_\_\_\_\_ Date \_\_\_\_\_

### TO BE COMPLETED BY THE APPLICANT (PLEASE PRINT OR TYPE)

Applicant Name  Project Name  Contact Number

For the property located at:

Existing use(s) of the Property:  
 Briefly describe/list the existing use(s) and/or structures

Proposed project and/or use(s) of the property:  
 Briefly describe the requested use and/or project

The proposed project for this property is for the establishment of a secure site for the stocking and distribution of 'Emergency Supplies' for the purpose of COVID-19 community spread mitigation within the Saxman community.

The site will have one 40' Conex placed for the storage of the emergency supplies. A secondary Conex and a potential "tiny home" are currently being explored for consideration at the property. The additional structures are funding dependent.

Total number of off street parking spaces

Total square feet of building(s) foot prints

Septic system

Water system

### Application Checklist

- Complete Site Plan
- Elevation of Structures
- Owner/Applicant Authorization Form
- Installation of Driveway  Yes  No



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## ZONING PERMIT APPLICATION (continued)

Fill in the applicable sections below for the proposed and existing uses listed on page 1.

### RESIDENTIAL USES

Total Number of Dwelling Units	1
Total Number of Bedrooms	

### COMMERCIAL USES

Total Number of Sleeping Rooms	1
Square Feet of Gross Floor Area	1,000
Number of Permanent Seats or Total Occupancy (Assembly Halls, Churches, etc.)	
Number of Employees*	1
Square Feet of Office Space	0
Square Feet of Display Space	0
Number of Company Vehicles**	1
Square Feet of Sales Floor Area	0

\* Specify if employees include teachers, instructors, nurses, students, interns, or doctors.

\*\* Company vehicles includes trailers, taxis, or truck trailers.

~ Specify if your use includes billiards, hair cutting chairs, automotive racks or bays

### Applicant Consent

I understand that for new construction or the expansion of the building footprint of an existing building, an inspection of the foundation forms must be conducted to insure that the building is located outside of the setback requirements prior to the pouring of the foundation. I understand that I am responsible for scheduling an inspection with Planning staff once the foundation forms are constructed. Prior to the inspection I am required to identify the boundary markers and/or property lines for the inspection. If the boundary markers and/or property lines are not identified and staff is unable to determine the location of markers or lines, I may be required to provide a survey by a professional surveyor to verify the foundation forms are located in compliance with the setback standards.

Upon completion of the construction, I understand that I must submit an As-Built Survey produced by a licensed surveyor to insure the construction is in accordance with the submitted site plan and initial inspection.

I agree to abide by the terms and/or conditions of this permit and understand that any changes to the plans will require notification to the Planning Department before construction commences.

  
Initial

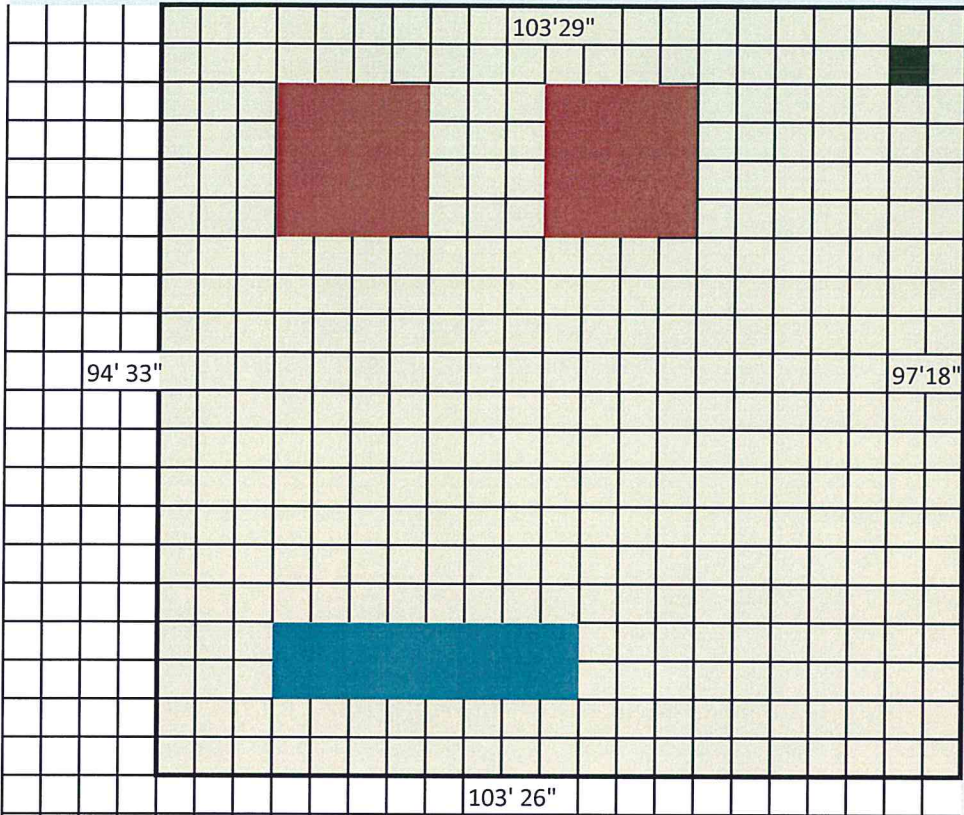
Please be advised that the issuance of a Zoning Permit does not preclude the applicant's responsibility to comply with all other applicable local, State and/or Federal laws or regulations.

Inspections will be scheduled for Wednesdays and Thursdays, based on staff availability. As-built Surveys required by financial institutions may be provided in lieu of a final inspection by staff.




A Zoning Permit for a structure **expires two years after the date it is issued** unless the actual construction is started and diligently continues to completion. When unusual circumstances prevent compliance with the time requirement, the applicant may submit a renewal request to the Borough asking to extend the permit -- provided the request is filed prior to the expiration of the said two years. Excavation is not considered construction.

Permit Appeal Procedures: A decision of the zoning official may be appealed to the Ketchikan Gateway Borough Planning Commission. An appeal must be filed in writing with the Planning Department within ten (10) days of the decision, in accordance with the procedures outlined in Section 18.05.080 and Chapter 18.155 of the Ketchikan Gateway Borough Code. Please contact the Planning Department for additional information by writing to 1900 First Ave, STE 126 Ketchikan, AK 99901 or by phone at 907-228-6610 or e-mail at [planning@kgbak.us](mailto:planning@kgbak.us).

E A G L E A V E

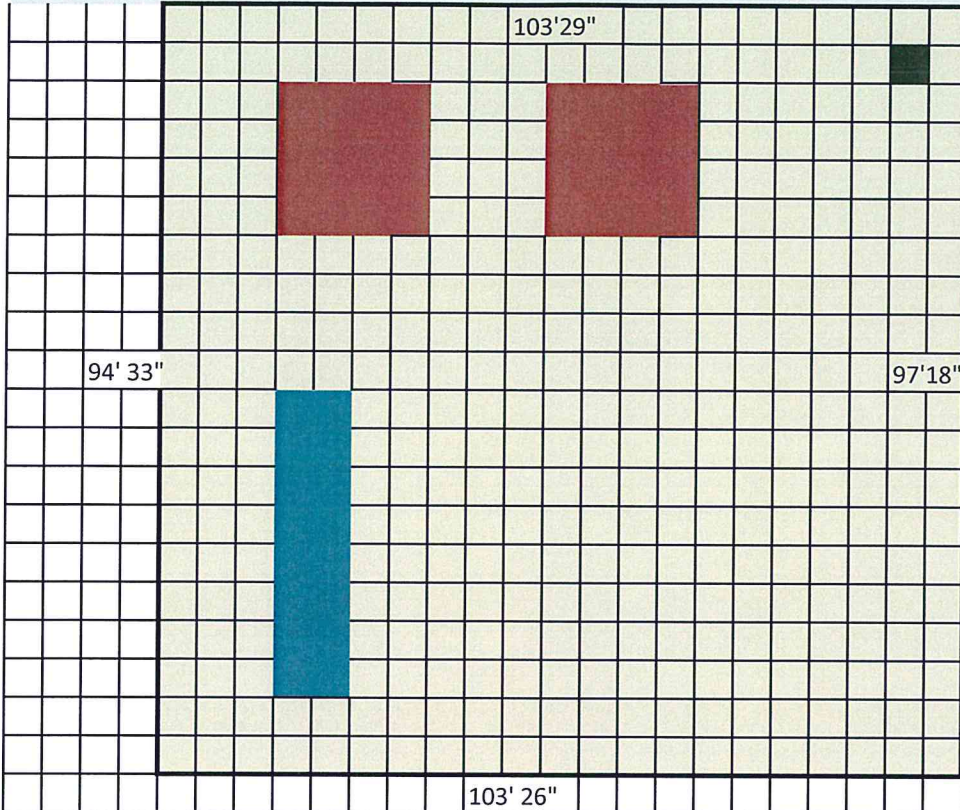


Option 1 LEGEND

-  Cresote Pole
-  Optional 20x20 Kit Home / Tiny Home
-  40-foot Conex




1 Square = approxiately 5 feet

E A G L E A V E



B  
E  
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T

Option 2 LEGEND

-  Cresote Pole
-  Optional 20x20 Kit Home / Tiny Home
-  40-foot Conex

1 Square = approxmiately 5 feet