# 601301 Customer Number



#### **Ketchikan Gateway Borough**

## **Permit Application**

2020-09-24	

20-059 Permit Number		Permit A	ppiicati	<u>1011</u>			oved By
remit Number	ALIGHED SEPTEMBER	Applicant In	nformation				W ELECTRIC METER
Owner TLINGIT-HA	AIDA REGIONAL HOUSIN	G AUTH	Second Ov	vner			
Mailing Address	446 JENKINS DR ; JUNE	AU AK; 99801					
<b>Applicant</b> TLI	NGIT-HAIDA REGIONAL	HOUSING AUTH		Relatio	nship		
Phone Number	Wo	rk Number			Preferred	Contact	
Email Address	☐ Contact By E			By Email	Preferred		
		Existing Proper	ty Informatior	1			
Property Address BEAR CLAN ST 2779 Zoning RM							
Deed Description  LOT 2-B, BLOCK 4, SAXMAN INDIAN VILLAGE, U.S. SURVEY 1652, ACCORDING TO THE PLAT THEREOF FILED APRIL 19, 1972, AS PLAT NO. 242, KETCHIKAN RECORDING DISTRICT, FIRST JUDICIAL DISTRICT, STATE OF ALASKA.							
Lot 002-000B	Block 004	Survey 165	52				
Assessor's Parcel Nu	mber 852140029000		Plat Number				
		Proposed Proje	ct Information	n	Permit E	xpires	
	20-059 is a request for a condition nse activities within an existing rean.						
Conditions							
☐ ZPNR	<b>ZONING PERMIT:</b> NEW BUILDING		ZONING I		:		ZONING PERMIT: MOBILE BUILDING
□ CORRESPONDENCE □ TEMPORARY ZONING PERMIT □ SIGN PERMIT							
THE BELOW APPLICATION(S) ARE REQUIRED:							
CITY BUILDING PERMIT	_ ADEC APPROVAL	☐ ADOT D	ORIVEWAY T	☐ KGI	B UTILITY I	HOOKUP -	SEWER SDC FEE



# CONDITIONAL USE PERMIT APPLICATION

TC	BE COMPLETED BY PLAN	AUG 2 0 2020	
Customer Number	Parcel Number 85-2140-009-	Case Number	GATEWAY BOROUGH PLANNING DEPT BY:
Zoning District	Overlay :	Zone VBR	Application Complete

	TO BE COMPLETED BY THE APPLICANT (PLEASE PRINT OR TYPE)		
Applicant Name	Project Name	Contact Number	
Organized Village of Saxman	OVS Emergency Operations Center	907-247-2502	
FOR THE PROPERTY LOCATED AT:			
2779 Bear Clan Ave Saxman, Alaska 99901			
Existing Use(s) of the Property:			
Rental Property with Single Family Dwelling	3		

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

The proposed project and use of the property is to establish an Emergency Operations Center to serve as a central command and control facility to carry out the strategic 'prepare, prevent, respond' activities to mitigate the spread of COVID-19 for the Saxman community.

The current structure is a dwelling and the Tribe will use this facility to coordinate the Coronavirus pandemic updates and information, and coordinate the delivery of supplies and equipment at this incident command center. Staff will work from this Center to provide community support during the Coronavirus pandemic. The dwelling has a carport which will be converted to an efficiency unit' to serve as an alternate isolation site when quarantine is needed.

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.

Date Received

DECEMPED.

Potential impacts include:

Noise during renovation / site preparation, noise from vehicle traffic,

#### **Application Checklist**

- Completed Zoning Permit Application
- Owner/Applicant Authorization Form



#### **Owner Authorization**

Project Name

**OVS Emergency Operations Center** 

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.

Date Received
AUG 2 0 2020 GATEWAY BOROUGH PLANNING DEPT BY:
Application Type Conditional Use Permit

check if primary contact Secondary Owner: Check if primary contact **Primary Owner:** 

Name: Jacqueline Pata Name: Lee Wallace Signature:

Company: Tlingit and Haida Regional Housing Authority Company: Organized Village of Saxman

Primary Phone: 907-780-6868 Primary Phone: 907-247-2502

E-mail: jpata@thrha.org E-mail: iragovt@kpunet.net

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

### APPLICANT CONTACT INFORMATION \(\overline{\times}\) check if primary contact

E-mail: iragovt@kpunet.net

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

Name: Lee Wallace 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

\* 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. Copy Retained

Revised: 7/19/2012 Page of

**Date Received** 

# ZONING PERMIT APPLICATION

TO BE COMPLETED BY PLANNING STAFF				EWAY BORO	UCH PLANNING DEPT	
Customer Number    Parcel Number   Permit Number			Application Complete  Approved by: (Zoning Official)  Date			
		ED BY THE APPLIC				
Applicant Name	Project Name			Contact N	lumber	
Organized Village of Saxman	OVS Emerger	ncy Operations Center		907-247-	-2502	
For the property located at:						
2779 Bear Clan Ave Saxman, Alask	ra 99901					
Existing use(s) of the Property: Briefly describe/list the existing use	e(s) and/or structures	100000				
Rental Property with one Single Fa	amily Dwelling					
Proposed project and/or use(s) of t Briefly describe the requested use			Total numbe	and posture operation	0	
The proposed project and use of the property is to establish an Emergency Operations Center to serve as a central command and control facility to carry out the strategic 'prepare, prevent, respond' activities to mitigate the spread of COVID-19 for the Saxman community.			Total square feet of building(s) foot prints 1,104			
The current structure is a dwelling and the Tribe will use this facility to coordinate the Coronavirus pandemic updates and information, and coordinate the delivery of supplies and equipment at this incident command center. Staff will work from this Center to provide community support during the Coronavirus pandemic. The dwelling has a carport which will be converted to an efficiency unit' to serve as an alternate isolation site when quarantine is needed.			Septic system  City System  Water system  City System  Application Checklist  Complete Site Plan  Elevation of Structures  Owner/Applicant Authorization Form  Installation of Driveway Yes No			

### **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 Total Number of Bedrooms COMMERCIAL USES** Total Number of Sleeping Rooms 1 Square Feet of Gross Floor Area 1,104 Number of Permanent Seats or Total Occupancy (Assembly Halls, Churches, etc.) Number of Employees\* 2 Square Feet of Office Space 1,104 Square Feet of Display Space 0

0

Number of Company Vehicles\*\*

Square Feet of Sales Floor Area

#### **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 than 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.

<u>Please be advised</u> 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 <u>expires two years after the date it is issued</u> 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.

<sup>\*</sup> Specify if employees include teachers, instructors, nurses, students, interns, or doctors.

<sup>\*\*</sup> Company vehicles includes trailers, taxis, or truck trailers.

<sup>~</sup> Specify if your use includes billiards, hair cutting chairs, automotive racks or bays