

# Municipality of Skagway

## Application for a Conditional Use Permit

Application/Permit # \_\_\_\_\_

**For Borough Staff to Fill Out:**  
 Application Complete & Accepted for  
 Review \_\_\_\_\_ Date

**Zoning District:**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Business General  | <input type="checkbox"/> Residential General      | <input type="checkbox"/> Industrial       |
| <input type="checkbox"/> Business Historic | <input type="checkbox"/> Residential Conservation | <input type="checkbox"/> Industrial Light |
|  | <input type="checkbox"/> Residential Low Density  | <input type="checkbox"/> Waterfront       |

**Application Fee: \$50.00**

**A conditional use permit gives site-specific flexibility to the zoning ordinance in a uniform and controlled manner. It permits uses that are desirable to the community, but may not be suitable at every location in the zone based on character, intensity, size or impact on surrounding uses. THE PLANNING COMMISSION MAY ATTACH RESTRICTIONS AND CONDITIONS DESIGNED TO FIT THE SPECIAL PROBLEMS WHICH THE USE PRESENTS.**

***INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.***

***YOUR CONDITIONAL USE PERMIT APPLICATION MUST INCLUDE THE FOLLOWING MATERIALS TO BE COMPLETE:***

- Permit application states the conditional use requested.
- A plot plan indicating date, north arrow, scale, exterior property boundaries and approximate dimensions, location of all existing and proposed buildings on the property and their approximate distance from lot lines, access for ingress and egress, sewer and water lines serving the property and power poles, all easements on the property, construction details, approximate dimension of parking areas and spaces, if applicable.
- Other information as necessary to illustrate the impact of the proposed conditional use.

**Applications will not be processed until all application fees have been submitted.**

**Property Owner:** Name \_\_\_\_\_  
 Phone & Fax \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 Signature \_\_\_\_\_  
 Date \_\_\_\_\_

**Business Owner:** Name \_\_\_\_\_  
 Phone & Fax \_\_\_\_\_  
 Mailing Address \_\_\_\_\_

Who should we contact regarding this permit?  
 \_\_\_\_\_

**Property Description** Lot(s)/Block(s) \_\_\_\_\_  
 Present Use \_\_\_\_\_  
 \_\_\_\_\_

Conditional Use Requested \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Does Proposed Work Involve:**

***MARK ALL BOXES THAT PERTAIN TO YOUR PROJECT***

- |   |  |
|---|--|
| <input type="checkbox"/> Residential Use                    | <input type="checkbox"/> New Construction                                  |
| <input type="checkbox"/> Commercial Use                     | <input type="checkbox"/> Modification of Existing Building(s)              |
| <input type="checkbox"/> Industrial Use                     | <input type="checkbox"/> Demolition of Existing Building(s)                |
| <input type="checkbox"/> Land Clearing                      | <input type="checkbox"/> Construction in or Adjacent to Tidelands or River |
| <input type="checkbox"/> Increased Traffic or Parking Areas |  |

**Is Property Serviced By:**

	<b>EXISTING SIZE</b>	<b>PROPOSED SIZE</b>
<input type="checkbox"/> Water	_____	_____
<input type="checkbox"/> Sewer	_____	_____
<input type="checkbox"/> Electric	_____	_____

**The proposed use may be different than present uses in this area and may have impacts on neighboring properties. Describe any impacts the proposed use will have and what measures will be taken to minimize these impacts. Attach additional information if necessary.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Per standards listed in SMC 19.04.060(B)(3) please provide information on the following:**

**THE PLANNING & ZONING COMMISSION MUST FIND ALL FOUR OF THE CONDITIONS SET OUT BELOW TO EXIST IN ORDER TO GRANT THE CONDITIONAL USE.**

**A. The requested conditional use will protect the public health, safety, and welfare:**

**How, please explain?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**B. The requested conditional use will not permanently or substantially injure the lawful use of neighboring properties or uses:**

**How, please explain?**

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**C. The requested conditional use will generally be in harmony with the comprehensive plan, coastal management plan, and other officially adopted plans:**

**How, please explain?**

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**D. The requested conditional use will not substantially decrease the value of or be out of harmony with property in the neighboring area:**

**How, please explain?**

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**The Coastal Management Program Area encompasses all lands within municipal boundaries excluding State and Federal Lands.**

**Does this conditional use fall within the Coastal Management Program Area?**  Yes  No

Skagway's inland coastal zone boundary includes all islands and the lands and waters within:

- The timberline of the coastal Sitka spruce/hemlock forest,
- Slopes contiguous with marine waters where mass wasting is evident or likely to occur, and
- Unvegetated areas left by receding glaciers where the coastal forest is likely to invade.

Skagway's seaward coastal zone boundary includes all marine waters and tidelands within the city limits.

**Have you completed a Coastal Project Questionnaire?**  Yes  No

- When a project is proposed for development within the City of Skagway's coastal zone, it is subject to the SCMP's enforceable policies, listed in Chapters 4.0 and 5.0 (and consolidated in Appendix A) of the Skagway Coastal Management Plan. If the project is a federal activity, or needs State or federal permit or other approval, the State reviews the project for consistency with the ACMP and the Skagway CMP, and Skagway formally participates in the State-coordinated review. If only local approval is required (such as a conditional use permit), then the Municipality reviews the project for consistency as part of the Planning Commission's regular permit review process.
- Federal lands and waters are excluded from Skagway's coastal zone. However, the federal government is not exempt from coastal management. Activities that require a federal license or permit, or that are sponsored by a federal agency, that would affect coastal uses or resources within Skagway's coastal zone must be consistent with the Skagway CMP to the maximum extent practicable.

**Proposals subject to the Coastal Management Program must meet the following criteria before approval:**

**A. Uses and activities must be compatible with the goals and objectives of the Skagway Coastal Management Program. The subject uses and activities of the Coastal Management Program are as follows:**

- |  |   |
|--|---|
| <input type="checkbox"/> Coastal Development;  | <input type="checkbox"/> Natural Hazards                      |
| <input type="checkbox"/> Coastal Access  | <input type="checkbox"/> Recreation                           |
| <input type="checkbox"/> Energy Facilities   | <input type="checkbox"/> Sand and Gravel Extraction           |
| <input type="checkbox"/> Fisheries and Fishery Enhancement                               | <input type="checkbox"/> Subsistence Uses                     |
| <input type="checkbox"/> Habitats  | <input type="checkbox"/> Transportation Routes and Facilities |
| <input type="checkbox"/> Historic, Prehistoric, Archaeological<br>and Cultural Resources | <input type="checkbox"/> Utility Routes and Facilities        |

**B. Priority use of the shoreline shall be accorded to uses and activities which are water-dependent or water-related, and to those uses and activities which are neither water-dependent or water-related for which there is no feasible and prudent inland alternative to meet the public need for the use or activity. Uses and activities which do not require shoreline access or are not enhanced by shoreline proximity must be located in a manner consistent with the policies and rules listed in SMC 17.40.**

**Planned Completion Date:** \_\_\_\_\_

**Statement of General Compliance:** I/We hereby certify that the improvement indicated herein will be so constructed as to meet all applicable ordinances and codes as adopted by the Municipality of Skagway.

Property Owner/Contractor/Agent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Official Use Only**

	Planning Commission	Public Hearing	Second Hearing	Permit Recorded
	Approval		(if Requested)	Date: _____
Granted	<input type="checkbox"/>	_____	_____	Book: _____
Denied	<input type="checkbox"/>			Page: _____

Conditions, Instructions, Notes: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Coastal Zone Management Consistency Review: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Application Fee: \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_ Receipt # \_\_\_\_\_

***THIS APPLICATION IS NOT YOUR PERMIT, YOU WILL RECEIVE YOUR CONDITIONAL USE PERMIT IN THE MAIL AFTER THIS APPLICATION HAS BEEN APPROVED BY THE APPROPRIATE COMMISSION. AN APPROVED BUILDING PERMIT IS ALSO NEEDED BEFORE ANY CONSTRUCTION BEGINS.***