

## **EXCEPTION APPLICATION**

City of Cordova, Alaska

| INSTRUCTIONS   |                                   | PERMIT TYPE   | FEE                |
|--|-----------------------------------|---|--------------------|
| Print or type requested informati returned to the applicant and wil request. All applications must be Department 21 days prior to the Regular Meeting. | filed with the Planning           | ☐ Exception   | \$250              |
|  | APPLICANT II                      | NFORMATION  |                    |
| Name:  |                                   |   |                    |
| Mailing Address:   |                                   |   |                    |
| City/State/Zip:  |                                   |   |                    |
| Phone Number:  |                                   |   |                    |
| Email Address:   |                                   |   |                    |
|  | OWNER INF                         | ORMATION*   |                    |
| Name:  |                                   |   |                    |
| Mailing Address:   |                                   |   |                    |
| City/State/Zip:  |                                   |   |                    |
| Phone Number:  |                                   |   |                    |
| Email Address:   |                                   |   |                    |
| *If different from applicant.  |                                   |   |                    |
|  | PROPERTY IN                       | FORMATION*  |                    |
| Address:   |                                   |   |                    |
| Legal Description:   |                                   |   |                    |
| Tax Lot No.:   |                                   |   |                    |
| Zone District:   |                                   |   |                    |
| *Planning Department can assist if u   | nknown.                           |   |                    |
|  | APPLICANT CI                      | ERTIFICATION  |                    |
| documentation is, to the best of   | f my (our) knowledge, true and ac | nation provided within this application and a curate. Furthermore, I (we) hereby authorizution for purposes of conducting necessary s | e the City and its |
| Applicant Signature:   |                                   | Date:   | <u>—</u>           |
| Print Name:  |                                   |   |                    |

| ADDITIONAL REQUIRED INFORMATION   |     |
|---|-----|
| ception, the Planning Commission must determine that the proposed use meets | the |

In order to grant the exception, the Planning Commission must determine that the proposed use meets the following three conditions (CMC 18.64.010). Each condition must have an explanation of how the proposed

use meets the condition.

Please describe the request in detail and fully state any and all reasons justifying the granting of the exception. Add any additional pages with drawings, maps, photos, and any other details that may be helpful to the Planning Commission as they make a decision on your request.

| 1. Such use will not be injurious to public health, safety, or welfare.                              |  |  |  |  |
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| 2. Such use will not be detrimental to other properties or uses in the vicinity.                     |  |  |  |  |
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| 3. Such use is not inconsistent with the general purposes and intent of the city's zoning ordinance. |  |  |  |  |
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