



# TOWN OF JACKSON PLANNING & BUILDING DEPARTMENT

## TRANSMITTAL MEMO

### Town of Jackson

- ☒ Public Works/Engineering
- ☒ Building
- ☐ Title Company
- ☒ Town Attorney
- ☒ Police

### Joint Town/County

- ☒ Parks and Recreation
- ☒ Pathways
- ☒ Joint Housing Dept

### Teton County

- ☐ Planning Division

- ☐ Engineer
- ☐ Surveyor- *Nelson*
- ☐ Assessor
- ☐ Clerk and Recorder
- ☐ Road and Levee

### State of Wyoming

- ☐ Teton Conservation
- ☐ WYDOT
- ☐ TC School District #1
- ☐ Game and Fish
- ☐ DEQ

### Federal Agencies

- ☐ Army Corp of Engineers

### Utility Providers

- ☐ Qwest
- ☐ Lower Valley Energy
- ☐ Bresnan Communications

### Special Districts

- ☒ START
- ☒ Jackson Hole Fire/EMS
- ☐ Irrigation Company

|   |   |
|---|---|
| <p>Date: January 27, 2023</p> <p>Item #: P23-020</p>  | <p style="text-align: center;">REQUESTS:</p> <p>The applicant is submitting a request for a Basic Use Permit for a change of use from retail to service at the property located at 160 W Broadway Ste C. known as LOTS 5-6, BLK. 2, WORT-1 PIDN: 22-41-16-33-1-02-004</p> <p>For questions, please call Katelyn Page at 733-0440, x1302 or email to the address shown below. Thank you.</p> |
| <p>Planner: Katelyn Page</p> <p>Phone: 733-0440 ext. 1302</p> <p>Email: <a href="mailto:kpage@jacksonwy.gov">kpage@jacksonwy.gov</a></p>                          |   |
| <p><b>Owner</b><br/>Nixbot Holdings, LLC<br/>PO Box 1241<br/>Jackson, WY 83001</p> <p><b>Applicant</b><br/>Ali Kalenak<br/>PO Box 14832<br/>Jackson, WY 83002</p> |   |
| <p><b>Please respond by: February 10, 2023 (Sufficiency)<br/>February 17, 2023 (with Comments)</b></p>  |   |

**RESPONSE:** For Departments not using Trak-it, please send responses via email to:  
[alangley@jacksonwy.gov](mailto:alangley@jacksonwy.gov)



**PLANNING PERMIT APPLICATION**  
Planning & Building Department

150 E Pearl Ave. | ph: (307) 733-0440  
P.O. Box 1687 | [www.townofjackson.com](http://www.townofjackson.com)  
Jackson, WY 83001

**For Office Use Only**

Fees Paid \_\_\_\_\_

Date & Time Received \_\_\_\_\_

Application #s \_\_\_\_\_

**Please note:** Applications received after 3 PM will be processed the next business day.

**PROJECT.**

Name/Description: Remede Co

Physical Address: 160 W Broadway Ave, Suite C Jackson, WY 83001

Lot, Subdivision: Lots 5-6, Blk 2, Warr-1 PIDN: 22-41-16-33-1-02-004

**PROPERTY OWNER.**

Name: Nixhot Holdings, LLC

Phone: 307-730-0000

Mailing Address: PO Box 1241 Jackson, WY 83001

ZIP: 83001

E-mail: fred@nixhot.com

**APPLICANT/AGENT.**

Name: Ali Kalenak

Phone: 843-568-2599

Mailing Address: PO Box 14832 Jackson, WY

ZIP: 83002

E-mail: ali@remede.co

**DESIGNATED PRIMARY CONTACT.**

\_\_\_\_ Property Owner ☒ Applicant/Agent

**TYPE OF APPLICATION.** Please check all that apply; review the type of application at [www.townofjackson/200/Planning](http://www.townofjackson/200/Planning)

**Use Permit**

☒ Basic Use

\_\_\_\_ Conditional Use

\_\_\_\_ Special Use

**Relief from the LDRs**

\_\_\_\_ Administrative Adjustment

\_\_\_\_ Variance

\_\_\_\_ Beneficial Use Determination

\_\_\_\_ Appeal of an Admin. Decision

**Physical Development**

\_\_\_\_ Sketch Plan

\_\_\_\_ Development Plan

\_\_\_\_ Design Review

**Subdivision/Development Option**

\_\_\_\_ Subdivision Plat

\_\_\_\_ Boundary Adjustment (replat)

\_\_\_\_ Boundary Adjustment (no plat)

\_\_\_\_ Development Option Plan

**Interpretations**

\_\_\_\_ Formal Interpretation

\_\_\_\_ Zoning Compliance Verification

**Amendments to the LDRs**

\_\_\_\_ LDR Text Amendment

\_\_\_\_ Map Amendment

**Miscellaneous**

\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_ Environmental Analysis

**PRE-SUBMITTAL STEPS.** To see if pre-submittal steps apply to you, go to [www.townofjackson.com/200/Planning](http://www.townofjackson.com/200/Planning) and select the relevant application type for requirements. Please submit all required pre-submittal steps with application.

Pre-application Conference #: \_\_\_\_\_ Environmental Analysis #: \_\_\_\_\_  
Original Permit #: \_\_\_\_\_ Date of Neighborhood Meeting: \_\_\_\_\_

**SUBMITTAL REQUIREMENTS.** Please ensure all submittal requirements are included. The Planning Department will not hold or process incomplete applications. Partial or incomplete applications will be returned to the applicant. Go to [www.townofjackson.com/200/Planning](http://www.townofjackson.com/200/Planning) and select the relevant application type for submittal requirements.

Have you attached the following?

- ☒ **Application Fee.** Fees are cumulative. Go to [www.townofjackson.com/200/Planning](http://www.townofjackson.com/200/Planning) and select the relevant application type for the fees.
- ☒ **Notarized Letter of Authorization.** A notarized letter of consent from the landowner is required if the applicant is not the owner, or if an agent is applying on behalf of the landowner. Please see the Letter of Authorization template at <http://www.townofjackson.com/DocumentCenter/View/845/LetterOfAuthorization-PDF>.
- ☒ **Response to Submittal Requirements.** The submittal requirements can be found on the TOJ website for the specific application. If a pre-application conference is required, the submittal requirements will be provided to applicant at the conference. The submittal requirements are at [www.townofjackson.com/200/Planning](http://www.townofjackson.com/200/Planning) under the relevant application type.

App fee  
Floor plan  
narrative - brief CL that describes what I'm doing.  
Housing mitigation → for SR plan + LDR compliance, taking over Δ  
LDR N/A, no Δ to current building → of tenants

**Note:** Information provided by the applicant or other review agencies during the planning process may identify other requirements that were not evident at the time of application submittal or a Pre-Application Conference, if held. Staff may request additional materials during review as needed to determine compliance with the LDRs.

Under penalty of perjury, I hereby certify that I have read this application and associated checklists and state that, to the best of my knowledge, all information submitted in this request is true and correct. I agree to comply with all county and state laws relating to the subject matter of this application, and hereby authorize representatives of Teton County to enter upon the above-mentioned property during normal business hours, after making a reasonable effort to contact the owner/applicant prior to entering.

Signature of Property Owner or Authorized Applicant/Agent

Name Printed

Date

Title



Town of Jackson  
150 E Pearl Avenue  
PO Box 1687, Jackson, WY 83001  
P: (307)733-3932 F: (307)739-0919  
www.jacksonwy.gov

Date:

## LETTER OF AUTHORIZATION

### NAMING APPLICANT AS OWNER'S AGENT

PRINT full name of property owner as listed on the deed when it is an individual OR print full name and title of President or Principal Officer when the owner listed on the deed is a corporation, or an entity other than an individual

Nixbot Holdings, LLC

Being duly sworn, deposes and says that Nixbot Holdings, LLC is the owner in fee of the premises located at:

Address of Premises: 160 W. Broadway, Ste C Jackson, WY 83001

Legal Description: Lots 5-6, BLK 2, Wot-1

Please attach additional sheet for additional addresses and legal descriptions

And, that the person named as follows: Name of Applicant/agent: Ali Kalkanak

Mailing address of Applicant/agent: PO Box 14872 Jackson, WY 83002

Email address of Applicant/agent: ali2remedew.com

Phone Number of Applicant/agent: 307-699-0090

Is authorized to act as property owner's agent and be the applicant for the application(s) checked below for a permit to perform the work specified is this(these) application(s) at the premises listed above:

☐ Development/Subdivision Plat Permit Application ☐ Building Permit Application

☐ Public Right of Way Permit ☐ Grading and Erosion Control Permit ☐ Demolition Permit

☒ Other (describe) Business license application, sign permit, BUP

Under penalty of perjury, the undersigned swears that the foregoing is true and, if signing on behalf of a corporation, partnership, limited liability company or other entity, the undersigned swears that this authorization is given with the appropriate approval of such entity, if required.

Property Owner Signature

Secretary

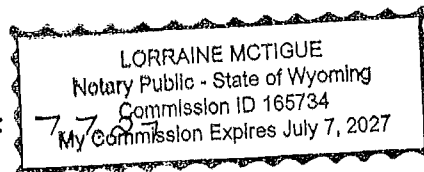
Title if signed by officer, partner or member of corporation, LLC (secretary or corporate owner) partnership or other non-individual Owner

STATE OF Wyoming )  
 ) SS.  
COUNTY OF Teton )

The foregoing instrument was acknowledged before me by FREDIE BOTUR JR this 5<sup>TH</sup> day of DECEMBER 2022. WITNESS my hand and official seal.

Notary Public

My commission expires:



## Katelyn Page

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**From:** Ali Kalenak <kalenak79@gmail.com>  
**Sent:** Friday, January 27, 2023 2:54 PM  
**To:** Katelyn Page  
**Subject:** Remède Project Narrative

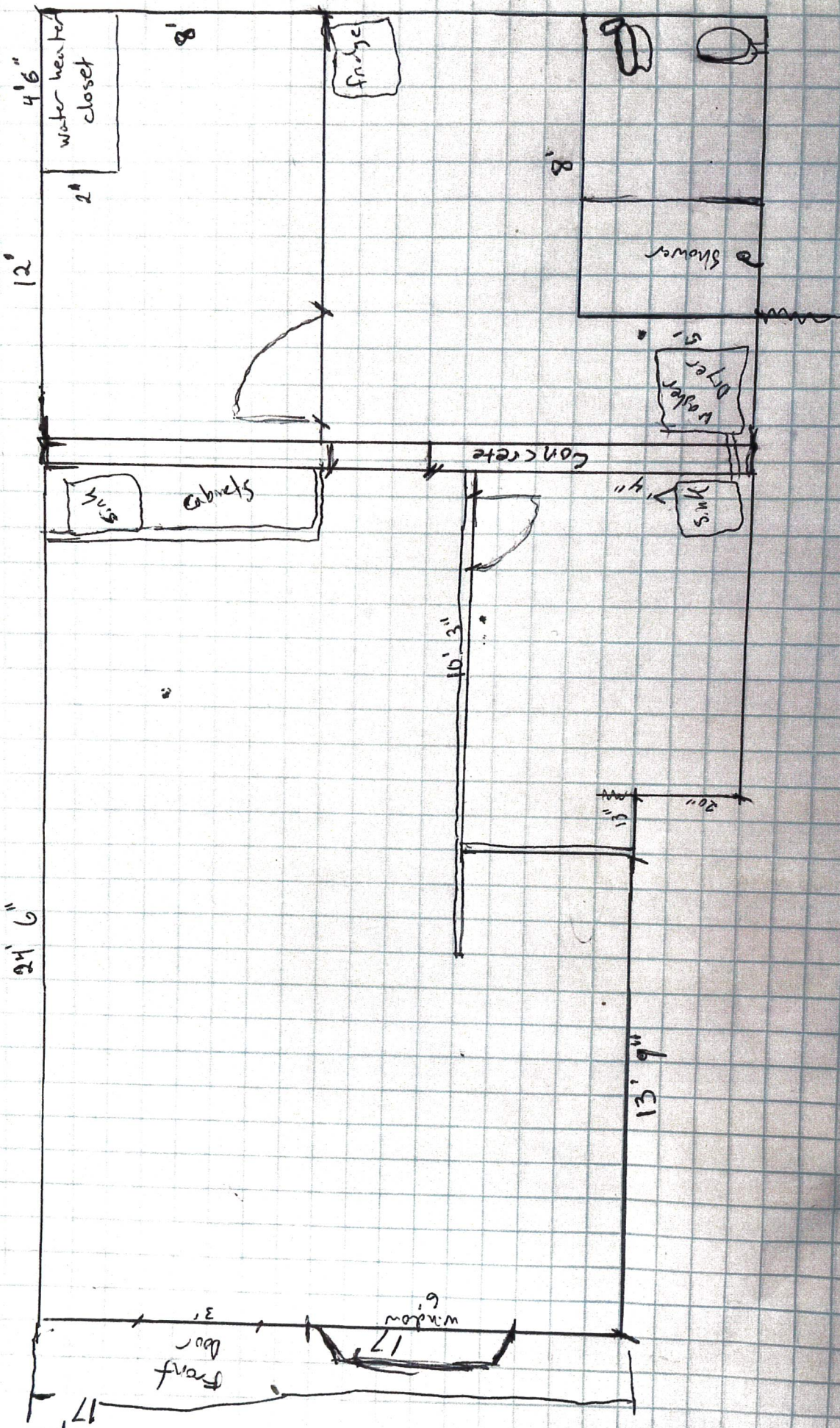


To Whom It May Concern:

Please see attached app for BUP. My business is Remède Co located at 160 W Broadway Ave, Suite C. The square footage is 760 square feet.

We offer IV hydration therapy, nutrient boosters, and aesthetic treatments. I currently have 5 employees. Please let me know if you have any questions or need any further information. Thank you.







# Housing Mitigation Plan

updated 1/8/21

Development of a new house, hotel, or commercial space generates the need for employees. The construction workforce builds the space, the commercial workforce or residential service workforce works in the space, and first responders are needed to protect the space. Only about 27% of the employees generated by development can afford housing in the community, but the community's "community first" character goal is that 65% of employees live locally. To bridge this affordability gap, each development is required to include affordable workforce housing proportional to the employees it generates. These housing mitigation requirements are established in Division 6.3 of the Land Development Regulations. This worksheet is intended to assist in meeting the requirements for a project. However, an error in the worksheet does not amend the actual standard; if you find an error please notify the Planning Department. Fill in the highlighted cells, all the other cells will autopopulate.

## Calculating the Requirement (Sec. 6.3.2 & 6.3.3)

### Step 1: Location

Town of Jackson

The applicable regulations vary by jurisdiction please identify the location of your project using the above dropdown options.

The required housing is based on the existing and proposed use of the site. Step 2 is to enter the existing use and Step 3 is to enter the proposed use. Section 6.3.2 of the LDRs establishes the applicability of the affordable workforce housing standards and Section 6.3.3 establishes the specifics on calculation of the requirement. Enter each use in its own row, add rows if needed. If a building has multiple units with the same use, describe each unit in its own row. (For example: if a duplex is composed of a 2,300 sf attached unit and a 1,700 sf attached unit, put each unit in its own row do not put in 4,000 sf of attached single-family.) If a unit type (e.g. apartment floor plan, or commercial tenant space) is replicated exactly multiple times, you may use the "Use Quantity" column to avoid adding multiple rows.

### Step 2: Existing Development

Housing is only required for new development. Please describe the existing use of the site so that it can be credited from the housing requirement. The definition of existing use is Section 6.3.2.A.1 of the LDRs. Generally, the existing use to enter is the use with the highest housing requirement that either existed in 1995, or has been permitted since 1995. Please attach proof of existence.

| Existing Use (Sec. 6.3.2.A) | Housing Requirement (Sec. 6.3.3.A) | Use Size:<br>bedrooms | Use Size:<br>habitable sf | Use Quantity | Housing<br>Required |
|-----------------------------|------------------------------------|-----------------------|---------------------------|--------------|---------------------|
| retail                      | 0.000216*sf                        | 1                     | 760                       | 1            | 0.164               |
|                             |                                    |                       |                           |              |                     |
|                             |                                    |                       |                           |              |                     |
|                             |                                    |                       |                           |              |                     |

Existing Workforce Housing Credit 0.164

### Step 3: Proposed Development

Please describe the proposed use of the site to determine if affordable workforce housing is required as part of the development. Describe the end result of the proposed development. (For example: in the case of an addition do not enter the square footage of the addition, enter the size of the unit upon completion of the addition.)

| Proposed Use | Housing Requirement (Sec. 6.3.3.A) | Use Size:<br>bedrooms | Use Size:<br>habitable sf | Use Quantity | Housing<br>Required |
|--------------|------------------------------------|-----------------------|---------------------------|--------------|---------------------|
| service      | 0.000216*sf                        | 1                     | 760                       | 1            | 0.164               |
|              |                                    |                       |                           |              |                     |
|              |                                    |                       |                           |              |                     |
|              |                                    |                       |                           |              |                     |

Affordable Workforce Housing Required: 0.000 units

Fee-in-Lieu Amount: \$ -

If the amount of required affordable workforce housing is less than one unit, you may pay the above fee in-lieu of providing the required housing. If you elect to pay the fee, your Housing Mitigation Plan is complete. If the requirement is greater than one unit, or you would like to provide a unit to meet the requirement, please proceed to the [Unit Type Sheet](#).