Land Use Application

(For office use only)

Permit #:

CITY OF AT YOUR SERVICE

Planning/Permit Application Center City Hall / 555 Liberty St. SE / Room 320 / Salem, OR 97301-3513 503-588-6173 * planning@cityofaalem.net If you need the following translated in Spanish, please call 503-588-6256. Si usted necesita lo siguiente traducido en español, por favor llame 503-588-6256.

Application type

Please describe the type of land use action requested:

SUBDIVISION MODIFICATION

| BATTLECREEK ROAD AND REED ROAD | | |
|--|--|--|
| 32.55 Acres | | |
| 083W12B/Tax Lots 1600 and 1699 083W11D/Tax Lot 400 | | |
| Vacant | | |
| RS and RM | | |
| Single-Family and Multi-Family | | |
| MODIFY SUB-ADJ21-06MOD1 | | |
| | | |
| | | |

People information

| | Name | Full Mailing Address | Phone Number and Email address |
|-----------|-------------------|------------------------|---|
| Applicant | Pyramid Holding | | |
| Agent | Did there entered | MULTI/TECH ENGINEERING | 503-363-9227 hdalton@mtengingering.net |

Project information

| Morningside NA |
|----------------|
| O Yes |
| ⊙ No |
| |
| Not Required |
| O Yes O No |
| |
| Not Required |
| |

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Authorization by property owner(s)/applicant

*If the applicant and/or property owner is a Limited Liability Company (LLC), please also provide a list of all members of the LLC with your application.

Copyright release for government entities: I hereby grant permission to the City of Salem to copy, in whole or part, drawings and all other materials submitted by me, my agents, or representatives. This grant of permission extends to all copies needed for administration of the City's regulatory, administrative, and legal functions, including sharing of information with other governmental entities.

Authorizations: Property owners and contract purchasers are required to authorize the filing of this application and must sign below.

- All signatures represent that they have full legal capacity to and hereby do authorize the filing of this application and certify that the information and exhibits herewith submitted are true and correct.
- I (we) hereby grant consent to the City of Salem and its officers, agents, employees, and/or independent contractors to enter the property identified above to conduct any and all inspections that are considered appropriate by the City to process this application.
- I (we) hereby give notice of the following concealed or unconcealed dangerous conditions on the property:

Electronic signature certification: By attaching an electronic signature (whether typed, graphical or free form) I certify herein that I have read, understood and confirm all the statements listed above and throughout the application form.

| Authorized Signature: Fall Wayee | Date: 3/11/24 |
|----------------------------------|---------------|
| Address (include ZIP): | |
| Authorized Signature: | Date: |
| Address (include ZIP): | |

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