

Planning/Permit Application Center

City Hall / 555 Liberty St. SE / Room 320 / Salem, OR 97301-3513

503-588-6173 * planning@cityofsalem.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.

(For office use only)

Permit #:

Application type

Please describe the type of land use action requested:

Class I extension to approved phased subdivision (SUB21-09)

Work site location and information

Street address or location of subject property	4540 Pringle Road SE
Total size of subject property	29.68 acres
Assessor tax lot numbers	083W11BC: Tax Lots 3000 and 3200
Existing use structures and/or other improvements on site	Existing farmstead (home and accessory structures)
Zoning	Residential Agriculture (RA) and Single Family Residential (RS)
Comprehensive Plan Designation	Residential
Project description	Class I extension to approved phased subdivision (SUB21-09) as code and requirements have not changed, nor has the project. Site development work has begun.

People information

	Name	Full Mailing Address	Phone Number and Email address
Applicant	Kehoe Northwest Properties	11627 S Summerville Avenue Portland, OR 97210	Contact Applicant's Consultant
Agent	Jennifer Arnold Emerio Design, LLC	1500 Valley River Drive #100 Eugene, OR 97401	jarnold@emeriodesign.com 503.746.9912
Paid By	Martin Kehoe	11627 S Summerville Avenue Portland, OR 97210	Contact Applicant's Consultant

Project information

Project Valuation for Site Plan Review	N/A
Neighborhood Association	Morningside Neighborhood Association
Have you contacted the Neighborhood Association?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Date Neighborhood Association contacted	N/A
Describe contact with the affected Neighborhood Association (The City of Salem recognizes, values, and supports the involvement of residents in land use decisions affecting neighborhoods across the city and strongly encourages anyone requesting approval for any land use proposal to contact the affected neighborhood association(s) as early in the process as possible.)	Not required per Table 300-2
Have you contacted Salem-Keizer Transit?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Date Salem-Keizer Transit contacted	N/A
Describe contact with Salem-Keizer Transit	N/A
Type the name and address of the Homeowners Association (If none, type "N/A".)	N/A

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: Michelle M. Morrow, Trustee

Print Name: Michelle M. Morrow, Trustee **Date:** 3/18/24

Address (include ZIP): PO Box 3257, Salem, OR 97302

Authorized Signature:

Print Name: **Date:**

Address (include ZIP):

(For office use only)		
Received by	Date:	Receipt Number:

Not using Internet Explorer?

Save the file to your computer and email to planning@cityofsalem.net.