

Land Use Application
Permit #: 24 107450 00 PLN

## Planning/Permit Application Center

City Hall
555 Liberty St. SE, Room 320
Salem OR 97301-3513
503-588-6213 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.

# **Project Description**

We would like to build a replacement 24'x45' gas station canopy, a Class 2 Adjustment and Class 3 Site Plan Review will be required. I've selected Class 3 Site plan review but could not find the Class 2 Adjustment Class 3 Site Plan Review

## Work site location and information

Street address of or location of subject	2315 COMMERCIAL ST SE	a.
property	<b>SALEM OR 97302</b>	)
Size of property (acres)	0.38	- 1
Tax Lot Number	073W34CB00100	
Neighborhood Association	SouthWest Association of Neighbors (SWAN)	

## **People information**

Applicant	JIAN KOID	901 NW E ST GRANTS PASS OR 97526	541-601-0817 jian@doublerproducts.com
Owner	MERRITT #1 INC	PO BOX 18297 SALEM OR 97305	
Contact	JIAN KOID	901 NW E ST GRANTS PASS OR 97526	541-601-0817 jian@doublerproducts.com

## **Project information**

Total Project Valuation	\$ 95,444.00
Site Area (Acreage)	.38
Type of Plan Check	Commercial/Industrial
MS4 Reporting	No
Existing use structures and/or other	Gas Station
improvements on site	

#### Land Use fees

Description	Amount
Site Plan Review	\$2,104.00
Automation Surcharge	\$5.00
	Total Face \$2,109.00



## **Terms and Conditions**

**Correct information:** I hereby certify I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

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.

**Indemnity:** I, the permit applicant, shall indemnify, defend and hold harmless the City of Salem, its officers, employees and agents from any and all claims arising out of or in connection with work done under this permit.

#### **Authorizations**

- Property owners and contract purchasers are required to authorize the filing of this application and must sign below. This signed form must be uploaded with other review documents.
- 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.
- 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.

This application was electronically submitted to the City of Salem Permit Application Center by **JIAN KOID** (PersonID: 347323) on **March 30, 2024** at **5:18 PM**.



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I (we) hereby give notice of the following concealed or unconcealed dangerous conditions on the property:			
	E-t-d shows and		
I (we) certify that I (we) have read, understood, and confirm all the statements	s listed above and		
throughout the application form			
Authorized Signature:			
Printed Name: Address (include ZIP): P.O. Box 18297 Salum OR 97	Date: 04/17/2024		
Address (include ZIP): P.O. Box 18297 Salem OR 97	305		
Authorized Signature:			
Printed Name:	Date:		
Address (include ZIP):			
Authorized Signature:			
Printed Name:	Date:		
Address (include ZIP):			

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