



Land Use Approval Extension Application

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.

Land use approval that extension is requested for

Application type	SPR
Case No	SPR-Adj-DR 20-30
Expiration date	8-15-24

Work site location and information

Street address or location of subject property	Market Street
Total size of subject property	1.11 acres
Assessor tax lot numbers	072W19BD/TL 3501
Zoning	RM-11
Comprehensive Plan Designation	Multi-Family
Project description	2-year extension request

People information

	Name	Full Mailing Address	Phone Number and Email address
Applicant	Larinda Peterson		larinda@redplumfarms.com
Agent	Brandie Dalton Land-Use Consultant	Multi/Tech Engineering 1155 13th Street SE, Salem OR 97302	
Paid by	Larinda Peterson		

Authorization by property owner(s)/applicant

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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: _____

Print Name: _____ **Date:** _____

Address (include ZIP): _____

Authorized Signature: Brandie Dalton

Print Name: Brandie Dalton **Date:** 7-23-24

Address (include ZIP): _____

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

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