

Land Use Application Permit #: 24 116025 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

Property line adjustment Property Line Adjustment

Work site location and information

Street address of or location of subject	1555 KENT ST NW	
property	SALEM OR 97304	
Size of property (acres)	0.00	
Tax Lot Number 073W21CB03400		
Neighborhood Association	West Salem Neighborhood Association	

Street address of or location of subject	845 RUMSEY RD NW	
property	SALEM OR 97304	
Size of property (acres)	0.00	
Tax Lot Number	073W21CB03500	
Neighborhood Association	West Salem Neighborhood Association	

People information

Owner

Applicant BRAND LAND USE 1720 LIBERTY ST SE 503-680-0949

SALEM OR 97302 britany@brandlanduse.com

-IRVING STEVE DWAINE 1 1555 KENT ST NW Owner SALEM OR 97304-3605

Jan L Irving, Revocable Living Trust

MARK QUISTAD Estate 845 RUMSEY RD NW SALEM OR 97304-3608

Contact Heather Gilmore Heather Gilmore PC

Contact Shelby Guizar Shelby@brandlanduse.com



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Project information

Site Area (Acreage) 0

Comprehensive Plan SF

Zoning RS
Number of Property Line Adjustments 1

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MS4 Reporting No

Existing use structures and/or other Existing single-family residences to remain

improvements on site

Neighborhood Association Contact Not required

Salem-Keizer Transit Contact Not required

Homeowners Association N/A

Land Use fees

DescriptionAmountLot Line Adjustment\$2,564.00Automation Surcharge\$5.00

Total Fees \$2,569.00

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 **BRAND LAND USE** (PersonID: 356998) on **July 26, 2024** at **3:23 PM**.



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(we) hereby give notice	of the following concealed or unconc	ealed dangerous conditions on th	ne property:
	,		<i>,</i>
throughout the application	have read, understood, and confirm a	all the statements listed above an	d
Authorized Signature: Printed Name: Address (include ZIP):	Jan Irving 1555 Kent It 1		July 26,20:
Authorized Signature: Printed Name:		D (
Address (include ZIP):			
Authorized Signature: Printed Name:		Date:	
Address (include ZIP):		Date.	
*	(For office use of		
Received by:	Date:	Receipt Number:	