

## Land Use **Application**

(For office use only)

Permit #:

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.

Application type

Please describe the type of land use action requested:

ADJUSTMENT CLASS-2

Wark site location and inform

Street address or location of subject property	6871 LIBERTY		
Total size of subject property	6.69Acres		
Assessor tax lot numbers	083W16CTax Lot ( 000		
Existing use structures and/or other improvements on site	Vacant		
Zoning	RMII		
Comprehensive Plan Designation			
Project description	SRC 702.020(e)(s)		
	7		

People information

	Name	Full Mailing Address	Phone Number and Email address	
Applicant	HARRISON INDUSTRIES,	10355 LIBERTY ROAD S, SALEM, OR	503-362-4588	
Agent BRANDIE DALTON LAND-USE CONSULTANT		MULTI/TECH ENGINEERING	503-363-9227	

**Project information** 

Neighborhood Association	Sunnyslope NA
Have you contacted the Neighborhood Association?	O Yes O No
Date Neighborhood Association contacted	9/2/21
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.)	
Have you contacted Salem-Keizer Transit?	O Yes O No
Date Salem-Keizer Transit contacted	
Describe contact with Salem-Keizer Transit	NA

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.

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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 at I certify herein that I have read, understoo application form.  Authorized Signature:	taching an electr d and confirm a	ronic signature (whether typed, graphical or free form) Il the statements listed above and throughout the
Print Name: KWIN HOW	ison	Date: 9/15/23
Address (include ZIP):		
Authorized Signature:	N-10-1	
Print Name:		Date:
Address (include ZIP):		
	(For office	use only)
Received by	Date:	Receipt Number:

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