



Land Use Application
Permit #: 24 118303 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

Build 2 new mixed-use buildings and a new parking area.
 Class 3 Site Plan Review

Work site location and information

Street address of or location of subject property	890 COMMERCIAL ST NE SALEM OR 97301
Size of property (acres)	0.37
Tax Lot Number	073W22AC03700
Neighborhood Association	Central Area Neighborhood Development Organization (CANDO)

People information

Applicant	BRANDON FAHLMAN	295 PATTERSON ST NW SALEM OR 97304	503-930-2786 bfahlman@gmail.com
Owner	BRANDON FAHLMAN	295 PATTERSON ST NW SALEM OR 97304	503-930-2786 bfahlman@gmail.com
Contact	BRANDON FAHLMAN	295 PATTERSON ST NW SALEM OR 97304	503-930-2786 bfahlman@gmail.com

Project information

Total Project Valuation	\$ 1,000,000.00
Site Area (Acreage)	.37
Comprehensive Plan	Central Business District
Zoning	Central Business District
Number of Lots	1
Type of Plan Check	Commercial/Industrial
MS4 Reporting	Yes
Existing use structures and/or other improvements on site	Vacant Land, Existing Asphalt
Neighborhood Association Contact	Email on March 21, 2024
Salem-Keizer Transit Contact	NA
Homeowners Association	NA



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Land Use fees

Description	Amount
Site Plan Review	\$4,474.00
Automation Surcharge	\$5.00
Total Fees	\$4,479.00

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 **BRANDON FAHLMAN** (PersonID: 333567) on **August 28, 2024** at **1:14 PM**.



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I (we) hereby give notice of the following concealed or unconcealed dangerous conditions on the property:

I (we) certify that I (we) have read, understood, and confirm all the statements listed above and throughout the application form.

DocuSigned by:
Brandon Falilman

Authorized Signature: _____
Printed Name: Brandon Falilman Date: 8/28/2024 | 1:21 PM PDT
Address (include ZIP): 295 Patterson St NW Salem OR 97304

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: