

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

Class 2 Site Plan Review for a building addition and construction of an accessory structure.

Class 2 Site Plan Review

Work site location and information

Street address of or location of subject property	3310 PORTLAND RD NE Salem OR 97301
Size of property (acres)	1.33
Tax Lot Number	073W13BB05100
Neighborhood Association	Northgate Neighborhood Association

People information

Applicant	NICK WALLACE	3095 RIVER RD N SALEM OR 97303	503-390-0281 nwallace@carlsonveit.com
Owner	FRANCISCO OCHOA	815 E 1ST AV STE B ALBANY OR 97321	541-228-7327 ochoa_cheesefactory@msn.com
Contact	NICK WALLACE	3095 RIVER RD N SALEM OR 97303	503-390-0281 nwallace@carlsonveit.com

Project information

Total Project Valuation	\$ 868,000.00
Site Area (Acreage)	1.33
Comprehensive Plan	COM
Zoning	CR
Number of Lots	1
Type of Plan Check	Commercial/Industrial
MS4 Reporting	Yes
Existing use structures and/or other improvements on site	Existing 9,050-sf building for food production, restaurant, and retail sales. Existing 120-sf trash enclosure. Existing paved parking, concrete sidewalks, green stormwater infrastructure, and landscaping.
Neighborhood Association Contact	N/A
Salem-Keizer Transit Contact	N/A
Homeowners Association	N/A

Land Use fees

Description	Amount
Site Plan Review	\$4,103.00
Automation Surcharge	\$5.00
Total Fees	\$4,108.00

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 **NICK WALLACE** (PersonID: 354864) on **July 10, 2024** at **11:21 AM**.

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

N/A

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

Authorized Signature: *Francisco Ochoa*

Printed Name: Francisco Ochoa Date: 9-11-24

Address (include ZIP): Don Froylan Creamery - 3310 Portland Road NE, Salem, OR 97301

Authorized Signature: *Nicholas L Wallace*

Printed Name: Nicholas L Wallace Date: 09/12/2024

Address (include ZIP): Carlson Veit Junge Architects - 3095 River Road N, Salem, OR 97303

Authorized Signature: _____

Printed Name: _____ Date: _____

Address (include ZIP): _____

(For office use only)

Received by:

Date:

Receipt Number: