

Land Use Application
Permit #: 24 119871 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**

Application to construct a new fueling station and convenience store.

Class 2 Adjustment

Class 2 Driveway Approach Permit

Class 3 Site Plan Review

## Work site location and information

Street address of or location of subject	0 MACLEAY RD SE	
property	SALEM OR 97317	
Size of property (acres)	1.54	
Tax Lot Number	072W32D002400	
Neighborhood Association	Southeast Mill Creek Association (SEMCA)	

# **People information**

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

SALEM OR 97302 britany@brandlanduse.com

Owner 7 Star Salem, LLC 7starcstore@gmail.com

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

SALEM OR 97302 britany@brandlanduse.com

Project information

Total Project Valuation \$ 2,200,000.00

Site Area (Acreage) 1.54
Comprehensive Plan IC
Zoning IC
Number of Class 2 Adjustments 2
Number of Driveway Approaches 2

Type of Plan Check Commercial/Industrial

MS4 Reporting Yes
Existing use structures and/or other Vacant

improvements on site

Neighborhood Association ContactInformational Letter Sent Via EmailSalem-Keizer Transit ContactInformational Letter Sent Via Email

Homeowners Association NA



#### Land Use fees

Description		Amount
Site Plan Review		\$5,858.00
Automation Surcharge		\$5.00
Driveway Approach - Class 2		\$1,376.00
Zoning Adjustment - Class 2		\$2,289.00
	<b>Total Fees</b>	\$9,528.00

## **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 **September 23, 2024** at **9:22 PM**.



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I (we) certify that I (we) he throughout the application	ave read, understood, and confirm all the state i form.	ements listed above and
Authorized Signature:	AMIS	
Printed Name:An	nritpal Singh	Date: _9/23/24
Address (include ZIP):	3812 Galloway St S. Salem OR 97302	
Authorized Signature:		
Printed Name:		Date:
Address (include ZIP):		
Authorized Signature:		
Printed Name:		Date:
Address (include ZIP):		Date

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