



#### **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 3 Site Plan Review and two Class 2 Adjustments.

Class 2 Adjustment

Class 3 Site Plan Review

#### Work site location and information

Street address of or location of subject	445 MARION ST NE
property	SALEM OR 97301
Size of property (acres)	2.65
Tax Lot Number	073W22DA12400
Neighborhood Association	Central Area Neighborhood Development Organization (CAl

# **People information**

Applicant GRETCHEN STONE 500 LIBERTY ST SE SUITE 100 503-480-8700

SALEM OR 97301-3890 gretchen@cbtwoarchitects.com

Owner CITY OF SALEM-CITY HA 555 LIBERTY ST SE

SALEM OR 97301-3513

Contact Cody Dompier - CBTWO A1 cody@cbtwoarchitects.com

Contact Gretchen Stone - CBTWO A gretchen@cbtwoarchitects.com



# Land Use Application Permit #: 24 121254 00 PLN

### Project information

Total Project Valuation \$ 4,290,050.00

Site Area (Acreage) 2.65

Comprehensive Plan Central Business

Zoning CB - Central Business District

Number of Lots 1
Number of Class 2 Adjustments 2

Type of Plan Check Commercial/Industrial

MS4 Reporting No

**Existing use structures and/or other**The existing structure is a public parking structure.

improvements on site

Neighborhood Association Contact CBTWO Architects and a member City Staff presented to the

CANDO neighborhood association at their June 18, 2024 meeting.

No additional contact has been made.

Salem-Keizer Transit Contact No.

**Homeowners Association** No HOA, not applicable.

#### Land Use fees

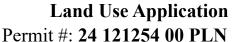
Description		Amount
Site Plan Review		\$7,568.05
Automation Surcharge		\$5.00
Zoning Adjustment - Class 2		\$2,289.00
	<b>Total Fees</b>	\$9,862.05

#### **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 **GRETCHEN STONE** (PersonID: 332797) on **October 14, 2024** at **4:52 PM**.



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I (we) certify that I (we) have read, understood, and throughout the application form.	confirm all the statements listed above and
Printed Name:	<b>D</b>
4.1.1 (4.1.1.7TD)	
Authorized Signature:	
Printed Name:	Date:
Address (include ZIP):	
Authorized Signature:	
Printed Name:	Date:
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(For office use only)				
Received by:	Date:	Receipt Number:		