



Land Use Application
Permit #: 24 118379 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

Modification to approved design, removing balconies from some units and converting office to studio apartment.
 Class 1 Design Review - Modification
 Class 3 Site Plan Review - Modification

Work site location and information

Street address of or location of subject property	1341 WALLER ST SE SALEM OR 97302
Size of property (acres)	0.16
Tax Lot Number	073W26CC07300
Neighborhood Association	Southeast Salem Neighborhood Association (SESNA)

People information

Applicant	RONALD PED	6850 BURNETT ST SE SALEM OR 97317	503-363-1456 rjp@rktect.com
Owner	DISTRICT 10 LLC	153 MAIN ST W MONMOUTH OR 97361	503-400-1335
Contact	RONALD PED	6850 BURNETT ST SE SALEM OR 97317	503-363-1456 rjp@rktect.com
Contact	Trevor Bednarz	trevor@rktect.com	



Land Use Application
Permit #: 24 118379 00 PLN

Project information

Total Project Valuation	\$ 2,000,000.00
Site Area (Acreage)	.16
Comprehensive Plan	Commercial
Zoning	CO
Number of Lots	1
Type of Plan Check	Multi Family
MS4 Reporting	Yes
Existing use structures and/or other improvements on site	None
Neighborhood Association Contact	None
Salem-Keizer Transit Contact	None
Homeowners Association	None

Land Use fees

Description	Amount
Site Plan Review	\$3,203.50
Automation Surcharge	\$5.00
Design Review - Class 1	\$369.50
Total Fees	\$3,578.00

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.



Land Use Application
Permit #: 24 118379 00 PLN

This application was electronically submitted to the City of Salem Permit Application Center by **RONALD PED** (PersonID: 176135) on **August 29, 2024** at **12:57 PM**.



Land Use Application
Permit #: 24 118379 00 PLN

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:

FA84A3F6C4774EE...

Authorized Signature: _____
Printed Name: SIMRAN DHOTE Date: 10/28/2024
Address (include ZIP): 152 main st w MONMOUTH OR 97361

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: