



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

Hazardous tree removal - four trees Tree and Vegetation Removal Permit

Work site location and information

| Street address of or location of subject | 1457 GOLDCREST AV NW | |
|--|-------------------------------------|--|
| property | SALEM OR 97304 | |
| Size of property (acres) | 0.00 | |
| Tax Lot Number | 073W16BD06700 | |
| Neighborhood Association | West Salem Neighborhood Association | |

People information

Applicant R & R TREE SERVICE INC 1710 COMMERCIAL ST NE 503-540-9038

SALEM OR 97301-0707 sales@rrtreeservice.com

Owner Christopher Easton 360-632-3631

Contact R & R TREE SERVICE INC 1710 COMMERCIAL ST NE 503-540-9038

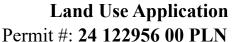
SALEM OR 97301-0707 sales@rrtreeservice.com

Project information

Site Area (Acreage) 0
of Trees Removed 4
MS4 Reporting No

Land Use fees

DescriptionAmountTree and Vegetation Removal Permit\$693.00Automation Surcharge\$5.00Total Fees\$698.00





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 **R & R TREE SERVICE INC** (PersonID: 304464) on **November 7, 2024** at **1:06 PM**.



Land Use Application Permit #: 24 122956 00 PLN

| I (we) certify that I (we) l | nave read, understood, and confirm all the statements | listed above and |
|------------------------------|---|------------------|
| throughout the application | • | |
| Authorized Signature: | Christopher Caston | |
| Printed Name: Chr | istopher Easton | Date: 11/07/2024 |
| Address (include ZIP): | 1457 Goldcrest Ave 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: | | |