

Planning/Permit Application Center

City Hall / 555 Liberty St. SE / Room 320 / Salem, OR 97301-3513

503-588-6173 * 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.

(For office use only)

Permit #:

Application type

Please describe the type of land use action requested:

Partition/UGA Preliminary Declaration/Class 3 Site Plan Review/(2) Class 2 Driveway Access Permits/Class 1 Design Review/(9) Class 2 Adjustments

Work site location and information

Street address or location of subject property	4455 27th Ave SE, Salem, OR 97302
Total size of subject property	4.05- acre parcel
Assessor tax lot numbers	08S-3W-12C Tax Lots 600 and 800
Existing use structures and/or other improvements on site	Single family residence
Zoning	RM-2
Comprehensive Plan Designation	Multi-Family Residential
Project description	Development of an approximately 131,421 square foot, 2 unit of affordable housing development.

People information

	Name	Full Mailing Address	Phone Number and Email address
Applicant	Home First Development, LLC	866 N Columbia Blvd, Suite A-25 Portland, OR 97217	971-222-8282 Jennifer@hfdpartners.com
Agent	Margaret Gander-Vo Saalfeld Griggs PC	PO Box 470, Salem, OR 97308	503-399-1070 margaret@sglaw.com
Paid By	Jennifer Huang	866 N Columbia Blvd, Suite A-25 Portland, OR 97217	971-222-8282 Jennifer@hfdpartners.com

Project information

Project Valuation for Site Plan Review	
Neighborhood Association	Morningside Neighborhood Association
Have you contacted the Neighborhood Association?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Date Neighborhood Association contacted	10/16/2024
Describe contact with the affected Neighborhood Association (The City of Salem recognizes, values, and supports the involvement of residents in land use decisions affecting neighborhoods across the city and strongly encourages anyone requesting approval for any land use proposal to contact the affected neighborhood association(s) as early in the process as possible.)	Pamela and Geoffrey, who are representatives of the neighborhood association, were contacted on 10/16/2024 and given notice of development
Have you contacted Salem-Keizer Transit? planning@cherriots.org	<input checked="" type="radio"/> Yes <input type="radio"/> No
Date Salem-Keizer Transit contacted	10/16/2024
Describe contact with Salem-Keizer Transit	Contacted Cherriots via email on 10/16/2024. Representative of Cherriots provided comments on 10/18/24
Type the name and address of the Homeowners Association (If none, type "N/A".)	N/A

Authorization by property owner(s)/applicant

***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.**

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.

Authorizations: Property owners and contract purchasers are required to authorize the filing of this application and must sign below.

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

Electronic signature certification: By attaching an electronic signature (whether typed, graphical or free form) I certify herein that I have read, understood and confirm all the statements listed above and throughout the application form.

Authorized Signature: Margaret Y. Gander-Vo

Print Name: Margaret Y. Gander-Vo Date: 11/15/2024

Address (include ZIP): 250 Church Street, Suite 200, Salem, Oregon 97301

Authorized Signature:

Print Name: Date:

Address (include ZIP):

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

Not using Internet Explorer?

Save the file to your computer and email to planning@cityofsalem.net.