



#### 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**

INTERIOR TENANT IMPROVEMENT IN AN EXISTING SHELL. INTERIOR SPACE TO CHANGE TO A NEW PIZZA RESTAURANT. NEW KITCHEN EQUIPMENT, TYPE-1 HOOD, ROOF TOP UNITS, UNDER GROUND PLUMBING AND NEW INTERIOR DINE IN STYLE SEATING.

Class 1 Site Plan Review - Modification

#### Work site location and information

Street address of or location of subject	4635 COMMERCIAL ST SE	
property	SALEM OR 97302	
Size of property (acres)	4.91	
Tax Lot Number	083W10DA02800	
Neighborhood Association	Faye Wright Neighborhood Association	

# **People information**

**Applicant** MARIO OCHOA 1000 CORPORATE CENTER DR STE 626-288-6898

MONTEREY PARK CA 91754 mario@garywang.com

Owner ISKUM II LLC 9615 GRAND RONDE RD

**GRAND RONDE OR 97347-9712** 

Contact MARIO OCHOA 1000 CORPORATE CENTER DR STE 626-288-6898

MONTEREY PARK CA 91754 mario@garywang.com

## Project information

Total Project Valuation \$ 180,000.00

Site Area (Acreage) 4.91 Number of Lots 1

Type of Plan Check Commercial/Industrial

MS4 Reporting No.

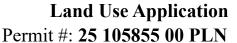
Existing use structures and/or other COMMERICAL RETAIL UNIT TO BE CONVERTED TO A

improvements on site DINE-IN PIZZA RESTAURANT

 Neighborhood Association Contact
 N/A

 Salem-Keizer Transit Contact
 N/A

 Homeowners Association
 N/A





### Land Use fees

DescriptionAmountSite Plan Review\$369.50Automation Surcharge\$5.00Total Fees\$374.50

#### **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 **MARIO OCHOA** (PersonID: 400827) on **March 13, 2025** at **10:34 AM**.



# Land Use Application Permit #: 25 105855 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 confirthroughout the application form.	m all the statements listed above and	
Authorized Signature:		
Printed Name:	_	
Authorized Signature:		
Printed Name:	Date:	
Address (include ZIP):		
Authorized Signature:		
Printed Name:	<b>Date:</b>	
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(For office use only)			
Received by:	Date:	Receipt Number:	