

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 remodel on the 2nd floor. This space is composed of both Business and R-4 Condition 2 occupancies. The remodeled space of the B occupancy will be approximately 5,525 SF and the remodeled space of the R-4 occupancy will be approximately 3,125 SF. This will be a 24/7 operation for withdrawal management. Patients will be admitted and overseen by a team of medical professionals to manage the coming off of substances. They are medically monitored, stabilized and then referred out for further care. The two occupancies will be separated by a 2-hour fire barrier. We will also be adding sprinklers to the entire building in this scope of work.

Class 1 Site Plan Review

Work site location and information

Street address of or location of subject property	1011 COMMERCIAL ST NE SALEM OR 97301
Size of property (acres)	1.77
Tax Lot Number	073W22AC01000
Neighborhood Association	Central Area Neighborhood Development Organization (CANDO)

People information

Applicant	KEVIN WEATHERS	7650 BEVELAND ST SW BLDG 120 PORTLAND OR 97223	503-239-7377 kweathers@adarchitects.com
Owner	Jennifer Worth	Jennifer.Worth@grandronde.org	
Contact	Jon Anderson	janderson@adarchitects.com	
Contact	KEVIN WEATHERS	7650 BEVELAND ST SW BLDG 120 PORTLAND OR 97223	503-239-7377 kweathers@adarchitects.com
Contact	Taylor Regier	tregier@perlo.biz	

Project information

Total Project Valuation	\$ 1,500,000.00
Site Area (Acreage)	1.77
Zoning	MU-R
Number of Lots	1
Type of Plan Check	Commercial/Industrial
MS4 Reporting	No

Land Use fees

Description	Amount
Site Plan Review	\$739.00
Automation Surcharge	\$5.00
Total Fees	\$744.00

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 **KEVIN WEATHERS** (PersonID: 396551) on **March 19, 2025** at **8:49 AM**.

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

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I (we) certify that I (we) have read, understood, and confirm all the statements listed above and throughout the application form.

Authorized Signature: _____

Printed Name: _____ **Date:** _____

Address (include ZIP): _____

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: