

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

Divide the lot into 2 separate lots. The lot with the existing "shop will be remodeled, and the second lot with the existing foundation will be used to build a duplex.

Middle Housing Land Division Tentative Plan - Three or Fewer

Work site location and information

Street address of or location of subject property	1582 WILTSEY RD SE SALEM OR 97306
Size of property (acres)	0.26
Tax Lot Number	083W14CD02000
Neighborhood Association	South Gateway Neighborhood Association

People information

Applicant	JEANIE JONES	2756 SW GOLF COURSE RD RD CORNELIUS OR 97113	503-730-0474 bronco.4453@yahoo.com
Owner	JASON EASTMAN	1582 WILTSEY RD SE SALEM OR 97306	503-877-6580 sgreen@blessyourbody.com
Owner	SUSAN GREEN	1582 WILTSEY RD SE SALEM OR 97306-9685	503-588-1663 sgreen@blessyourbody.com
Contact	Kevin Martin	503 515-3509	

Project information

Site Area (Acreage)	.26
Zoning	SFR
# of lots proposed	2
Is this expedited ?	No
Number of Lots	2
MS4 Reporting	No
Existing use structures and/or other improvements on site	Use existing keep existing shop on one lot and use the existing foundation on the second lot for a new construction duplex
Neighborhood Association Contact	N/A
Salem-Keizer Transit Contact	No contact
Homeowners Association	None

Land Use fees

Description	Amount
Automation Surcharge	\$5.00
Middle Housing Land Division Tentative Plan	\$5,883.00
Total Fees	\$5,888.00

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 **JEANIE JONES** (PersonID: 315663) on **April 2, 2025** at **8:14 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: