

Land Use Application
Permit #: 25 108786 00 PLN

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

A Class 2 Site Plan Review for the repair and maintenance of existing paved driveways, parking areas and sidewalks for Grant Community School. The subject property is 2.59-acres in size, zoned PE (Public and Private Educational Services) and located at 725 Market Street NE (Marion County Assessors Map and Tax Lot Number 073W23BC / 5400).

Class 2 Site Plan Review

Work site location and information

Street address of or location of subject	725 MARKET ST NE
property	SALEM OR 97301
Size of property (acres)	2.59
Tax Lot Number	073W23BC05400
Neighborhood Association	Grant Neighborhood Association

People information

Applicant NATALIA IZQUIERDO 289 E ELLENDALE AV STE 703 503-364-8207

DALLAS OR 97338 natalia@lockeengineers.com

Owner SALEM KEIZER SCHOOL PO BOX 12024 503-391-1133

SALEM OR 97309 023constructionsvcs@salkeiz.kl.

Contact Kathy Roberts roberts kathy@salkeiz.k12.or.us

Contact Todd Klocke Klocke Todd@salkeiz.k12.or.us

Project information

Total Project Valuation \$ 90,000.00

Site Area (Acreage) 2.59
Number of Lots 1

Type of Plan Check Commercial/Industrial

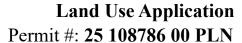
MS4 Reporting No

Existing use structures and/or other Elementary School

improvements on site

Neighborhood Association Contact Email to Grant Neighborhood Association on 4/17/25

Salem-Keizer Transit Contact None
Homeowners Association None





Land Use fees

DescriptionAmountSite Plan Review\$2,180.00Automation Surcharge\$5.00Total Fees\$2,185.00

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 **NATALIA IZQUIERDO** (PersonID: 401795) on **April 23, 2025** at **2:20 PM**.



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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 throughout the application form.	confirm all the statements listed above and	
Authorized Signature:		
Printed Name:	Date:	
A 1.1 (* 1 . 1 . 71D)		
Authorized Signature:		
Printed Name:	Date:	
Address (include ZIP):		
Authorized Signature:		
Printed Name:	Date:	
411 (* 1 1 71D)		

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