



### 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**

Class 2 Adjustment application to allow a 10-foot fence to be installed around the approved sport court amenity to keep sport equipment within the court.

Class 2 Adjustment

#### Work site location and information

Street address of or location of subject	3480 BLOSSOM DR NE		
property	SALEM OR 97305		
Size of property (acres)	3.55		
Tax Lot Number	073W01A003300		
Neighborhood Association	Northgate Neighborhood Association		
	3434 BLOSSOM DR NE		
Street address of or location of subject	3434 BLOSSOM DR NE		
Street address of or location of subject property	3434 BLOSSOM DR NE SALEM OR 97305		
•			
property	SALEM OR 97305		

# **People information**

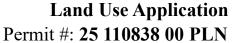
ApplicantBRAND LAND USE1720 LIBERTY ST SE503-680-0949SALEM OR 97302britany@brandlanduse.com

Owner Blossom Gardens Limited P 3462 NE Sandy Blvd, Portland, OR

Owner Blossom Gardens Limited Pt 3462 NE Sandy Blvd, Portland, OR

Contact Shelby Guizar shelby@brandlanduse.com

Contact Tim tim@gl-dev.com





# **Project information**

Site Area (Acreage)	10.05
<b>Number of Lots</b>	2
Number of Class 2 Adjustments	1
MS4 Reporting	No
Neighborhood Association Contact	n/a
Salem-Keizer Transit Contact	n/a
Homeowners Association	n/a

#### Land Use fees

Description		Amount
Automation Surcharge		\$5.00
Zoning Adjustment - Class 2		\$1,989.00
	Total Fees	\$1,994.00

#### **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 **BRAND LAND USE** (PersonID: 356998) on **May 22, 2025** at **3:24 PM**.



# Land Use Application Permit #: 25 110838 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 conthroughout the application form.	nfirm all the statements listed above and	
Authorized Signature:		
Printed Name:	Date:	
Address (include ZIP):		
Authorized Signature:		
Printed Name:	Date:	
Authorized Signature:		
Printed Name:	Date:	
4.11 (4.1.1.7TD)		

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