Oregon DEQ Land Use Compatibility Statement

SECTION 1 - TO BE COMPLETED BY APPLICANT							
1A.Applicant Name: PETROCARD, INC	1B. Project Name: SALEM INDUSTRIALWAY BULL						
Contact Name: WES SHERMAN	Physical Address: 3029 IND WAY NE						
Mailing Address: Po Box 40	City, State, Zip: SALEM OR 97301						
City, State, Zip: KENT WA 98035	Tax Lot #: 073W14AD01100						
Telephone: 800.950-3835	Township: 07 Range: 03 Section: 14						
Tax Account #:	Latitude: 44.9658176						
91-1311707	Longitude: - 123-0131702						
1C. Describe the project, include the type of development (attach additional information if necessary): BULK FUEL PLANT SHARE							
1D. Check the type of DEQ permit(s) or approval(s) being a □ Air Quality Notice of Construction Air Quality Title V Permit □ Air Quality Indirect Source Permit □ Parking/Traffic Circulation Plan □ Solid Waste Land Disposal Site Permit □ Solid Waste Treatment Facility Permit □ Solid Waste Composting Facility Permit □ includes Anaerobic Digester) □ Conversion Technology Facility Permit □ Solid Waste Letter Authorization Permit	applied for at this time. ☐ Clean Water State Revolving Fund Loan Request ☐ Wastewater/Sewer Construction Plan/ Specifications (includes review of plan changes that require use of new land) ☐ Water Quality NPDES Individual Permit ☐ Water Quality WPCF Individual Permit (for onsite construction-installation permits use the DEQ Onsite LUCS form ☐ Water Quality NPDES Stormwater General Permit (1200-A, 1200-C, 1200-CA,						
 □ Solid Waste Material Recovery Facility Permit □ Solid Waste Energy Recovery Facility Permit □ Solid Waste Transfer Station Permit □ Waste Tire Storage Site Permit □ Pollution Control Bond Request □ Hazardous Waste Treatment, Storage or Disposal Permit 	1200-COLS, and 1200-Z) □ Water Quality General Permit (all general permits, except 600, 700-PM, 1700-A, and 1700-B when they are mobile) □ Water Quality 401 Certification for federal permit or license						

Oregon DEQ Land Use Compatibility Statement

SECTION 2 - TO BE COMPLETED BY CITY OR COUNTY PLANNING OFFICIAL							
Applicant Name: PetroCard, Inc	Project Name: Salem Industrial Way Bulk Plant						
Instructions: Written findings of fact for all local decisions are required; written findings from previous actions are acceptable. For uses allowed outright by the acknowledged comprehensive plan, DEQ will accept written findings in the form of a reference to the specific plan policies, criteria, or standards that were relied upon in rendering the decision with an indication of why the decision is justified based on the plan policies, criteria, or standards.							
2A. The project proposal is located: ☐ Inside UGB ☐ Outside UGB							
2B. Name of the city or county that has land use jurisdiction (the legal entity responsible for land use decisions for the subject property or land use): City of Salem							
2C. This project is not within the jurisdiction of any land use, zoning, or planning entity This project is also within the jurisdiction of the following land use, zoning, or planning entity							
	Measure 49 is not applicable ☐ Yes, if yes, then check one:						
Express; approved by DLCD order #:							
☐ Conditional; approved by DLCD order #:							
☐ Vested; approved by local government decision or court j	udgment docket or order #:						
2E. Is the activity a composting facility? ☐ No ☐ Yes;	SB 462 (2013) notification requirements have been met.						
Please complete this form to address the activity or use previous page). If the activity or use is to occur in multiper phases described in 1C. For example, if the applicant's	dged comprehensive plan as required by OAR 660-031? for which the applicant is seeking approval (see 1.C on the ble phases, please ensure that your approval addresses the project is described in 1C. as a subdivision and the LUCS ght but does not indicate whether the subdivision is approved, bdivision is obtained from the local planning official.						
☐ The activity or use is specifically exempt by the acknowle	dged comprehensive plan; explain:						
YES, the activity or use is pre-existing nonconforming us	e allowed outright by (provide reference for local ordinance):						
X YES, the activity or use is allowed outright by (provide re	eference for local ordinance): SRC Sec. 554.005(a)						
YES, the activity or use received preliminary approval that includes requirements to fully comply with local requirements; findings are attached.							
☐ YES, the activity or use is allowed; findings are attached.							
□ NO, see 2D. above, activity or use allowed under M	easure 49; findings are attached						
NO, (complete below or attach findings for noncompliar with before compatibility can be determined).	nce and identify requirements the applicant must comply						
Relevant specific plan policies, criteria, or standards:							
Provide the reasons for the decision:							
Additional comments (attach additional information as needed	d): Previous approval granted by LUCS 10-107439-ZO						
Planning Official Signature:	Title: Planner I						
Print Name: Caroline DeBruine Telep	phone #: 503-540-2326						
If necessary, depending upon city/county agreement on jurisdiction outside city limits but within UGB:							
Planning Official Signature: Title:							
	hone #: Date:						

CITY OF	Salem_ AT YOUR SERVICE	
■ TO:	Leah deVries	
■ FROM:	Pamela Cole	
■ DATE:	5/6/2010	
■ TRACKI #:	NG 10-107439-ZO	

LAND USE COMPATIBILITY COMMENT-REFERRAL

Please review attached information and provide comments regarding any applicable City of Salem permit requirements.

■ REFERRAL AGENCY: Oregon Department of Environmental Quality ■ SUBJECT PROPERTY 073W14AD01100L1
■ DEVELOPMENT PROPOSED: Pacific Pride fueling station
Are City Permits Required?: YES 🗖 (please list below) NO 💢
● Type of Permit:
Has Permit Been Issued Yet? YES □ NO □
Type of Permit:
Has Permit Been Issued Yet? YES 🔲 NO 🔲
Type of Permit:
Has Permit Been Issued Yet? YES 🔲 NO 🗖
Additional Comments:
Staff Initial SW Date 5/12/10
PLEASE RETURN COMPLETED COMMENT-REFERRAL FORM TO: Pamela Cole (Current Planning) by: ASAP .
Thank you

Oregon Department of Environmental Quality LAND USE COMPATIBILITY STATEMENT

SECTION 1 - TO BE COMPLETED BY APPLICANT (may be filled in electronically by tabbing to each field)					
1. Applicant Name (This must be the same name as the legal name you will use on your permit/registration application form):					
Mailing Address: P.O. Box 7135					
City, State, Zip: Salem OR 97303 Telephone: 503-363-7676 (Reder)					
2. Property Physical Address: 3029 Sata Industrial Wy NE					
City, State, Zip: Salem, OR 97303					
County: Marion Tax Lot #: 673W14AD 01100L1					
3. Describe the type of development, business, or facility and the provided services or products:					
4. Check the type of DEQ Air Contaminant Discharge Permit being applied for at this time: Basic or General Air Contaminant Discharge Permit Registration					
SECTION 2 - TO BE COMPLETED BY CITY OR COUNTY PLANNING OFFICIAL					
Instructions: Written findings of fact for all local decisions are required; written findings from previous actions are acceptable. For allowed pre-existing uses and uses allowed outright, DEQ will accept written findings in the form of a citation to the applicable land use regulation. In all other cases, DEQ will accept a reference to the specific plan policies, criteria, or standards that were relied upon in rendering the decision with an indication of why the decision is justified based on the plan policies, criteria, or standards.					
A. The project proposal is located: Inside city limits Inside UGB Outside UGB					
B. Name of the city or county that has land use jurisdiction (the legal entity responsible for land use decisions for the subject property): Can of Selem					
C. Is the use compatible with the applicable acknowledged comprehensive plan and land use regulations? Please complete this form to address the use for which the applicant is seeking approval (see #3 in Section 1 above). If you cannot answer "yes," please discuss your findings with the applicant. DEQ cannot proceed with permit issuance if the use is not compatible with your acknowledged comprehensive plan. DEQ will not accept any alterations to this form. Yes, the activity or use is pre-existing nonconforming use allowed outright by (provide reference to local ordinance):					
Yes, the activity or use is allowed outright by (provide reference to local ordinance): SRC Chapter 158.020 f) (4) Fuel dealers Yes, the activity or use received preliminary approval that includes requirements to fully comply with local requirements; findings are attached.					
Yes, the activity or use is otherwise compatible with the acknowledged comprehensive plan and land use regulations; findings are attached.					
Additional comments (attach additional information as needed):					
Planning Official Signature: Pamer J Gle Title: Associate Planner					
Print Name: Parely J. Cole Telephone #: 503-588-6173 Date: 5/6/2010					



Sequence #: 10-107439-ZO

Payment #: 10093641

Date: May 05, 2010

Check #: CR047826

ZONING

RECEIPT

Customer

PETER NELSON 2675 ELLEN LN NW SALEM OR 97304

Payment For Address: 3029 INDUSTRIAL WY NE

Description	Billed Fees	Previously Paid	Today's Payment	Balance Due
Verification of Land Use - government	\$22.00			
Automation Surcharge	\$2.50			
Processing Fee - PL	\$12.50			
Total for Bill # 671473:	\$37.00	\$0.00	\$37.00	\$0.00
RECEIPT TOTAL:	\$37.00	\$0.00	\$37.00	\$0.00

Total Paid:

\$37.00