

LAND USE APPLICATION

Application Type: Subdivision					
APPLICANT INFORMATION					
(Check one box below for designated contact person rego	arding this applica	ation)	5 U D		
Applicant Name: HSF Development, LLC			Daytime Phone:		
Mailing Address: 3425 Boone Road SE			Fax Number:		
City/State: Salem/Oregon	Zip: <u>97317</u>		Email:		
■ Agent: Brandie Dalton, Land-Use Planner			Daytime Phone:	503-363-92	27
Mailing Address: 1155 SE 13th Street			Fax Number:		
City/State: Salem/Oregon	Zip: 97302		Email:		
PROPERTY INFORMATION					
6719 Devon Avenue			89 Acres	083W22C/TL300	
(Street Address or Location of Subject Property)		(Tota Prop	al Size of Subject erty)	(Assessor Tax Lot Numbers)	
SFD and Vacant				'Developing Res'	
(Existing Use, Structures, and/or Other Improvements	ning)	(Comp Plan	Designation)		
PROPOSED PROJECT INFORMATION					
86-Lot Single Family Dwelling Subdivision					
(Describe the Proposed Use or Development of Subj	ject Property)				
neighborhood association(s) as early in the process as possible. (Describe Contact with the Affected Neighborhood)	d Association)			Date	Contacted
SALEM – KEIZER TRANSIT CONTACTED?	No No				
(Describe Contact with Salem – Keizer Transit)				Date	Contacted
AUTHORIZATION BY PROPERTY OWNER(s) / APPL *If the applicant and/or property owner is a Limited Liability with your land use application. (Property owners and confract purchasers are required to a All signatures represent that they have full legal capacity information and exhibits herewith submitted are true and a I (we) hereby grant consent to the City of Salem and its a	ty Company (LLC) authorize the filing to and hereby de- correct. officers, agents, e	g of this cautho mploy	s application and a orize the filing of this rees, and/or indep	must sign belov s application a endent contra	w) Indicertify that the
property identified above to conduct any and all inspectio (we) hereby give notice of the following property:	g concealed	or u	nconcealed dai	ngerous con-	ditions on the
	Chris Jundt, M	lanao	ıer		7/5/2018
(Signature)	(Print Name)			(Date)	
3425 Boone Road SE					
(Add	dress - Include Zip)			
(Signature)	-	(Pr	rint Name)		(Date)
(Add	dress - Include Zip	>)			
STAFF USE ONLY - DC	NOT WRITE BELOW	- STA	FF USE ONLY		