

Land Use Application

Planning/Permit Application Center

City Hall / 555 Liberty St. SE / Room 320 / Salem, OR 97301-3513

503-588-6173 * 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.

Application type

Please describe the type of land use action requested:

(For office use only)

Permit #: 20-101577-LD

20-101578-LD

Work site location and information

Work site location and milot mation	
Street address or location of subject	Doaks Ferry Road (Eagles View Phase 6)
property	
Total size of subject property-	Acres 15
Assessor tax lot numbers	7.3.30/Tax Lot 100
Existing use structures and/or other	Vacant
improvements on site	
Zoning	RS
Comprehensive Plan Designation	'Single-Family Residential'
Project description	31-lot single-family dwelling subdivision

People information

	Name	Full Mailing Address	Phone Number and Email address
Applicant	Comfort Homes	PO Box 4607 Salem/OR 97304	503-409-2282 Conforthomesphwegmaile
Agent	Brandie Dalton Land-Use Consultant	Multi/Tech Engineering 1155 SE 13th Street, Salem, OR, 97302	503-363-9227 bdalton@mtengineering.net

Project information

Neighborhood Association	West Salem Neighborhood Association
Have you contacted the Neighborhood Association?	⊙ Yes
	O No
Date Neighborhood Association contacted	12-18-2019
Describe contact with the affected Neighborhood Association (The City of Salem recognizes, values, and supports the involvement of residents in land use decisions affecting neighborhoods across the city and strongly encourages anyone requesting approval for any land use proposal to contact the affected neighborhood association(s) as early in the process as possible.)	Via Email and Phone Call w/Kevin Chambers Will be attending a NA meeting in January
Have you contacted Salem-Keizer Transit?	O Yes O No
Date Salem-Keizer Transit contacted	
Describe contact with Salem-Keizer Transit	

Authorization by property owner(s)/applicant

*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.

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.

Authorizations: Property owners and contract purchasers are required to authorize the filing of this application and must sign below.

- 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.
- I (we) hereby give notice of the following concealed or unconcealed dangerous conditions on the property:

Electronic signature certification: By attaching an electronic signature (whether typed, graphical or free form)

I certify herein that I have read, understoo application form.	and confirm all the statements listed above and throughout the
Authorized Signature:	
Print Name: Andre M	akarenko Date: 12/23/19
Address (include ZIP): PO B(1x 5607, Salem UR 97304
Authorized Signature:	2
Print Name:	Date:
Address (include ZIP):	
Vinafora III.	(For office use only)
Received by Brandon Pike	Date: Jan. 7, 2020 Receipt Number: 20-101577-LD 20-101578-LD



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Work site location and information

Work site location and information		
Street address or location of subject	Doaks Ferry Road (Eagles View Phase 6)	
property		
Total size of subject property		
Assessor tax lot numbers	7.3.30/Tax Lot 100	
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improvements on site		
Zoning	RS	
Comprehensive Plan Designation	'Single-Family Residential'	
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I certify herein that I have read, understoo application form.	d and confirm all the	e statements listed above and throughout the
Authorized Signature:		
Print Name: Andre M	akarenko	Date: 12/23/19
Address (include ZIP): PO BC)x 5607	, Salem OR 97304
Authorized Signature:	2	
Print Name:		Date:
Address (include ZIP):		
	(For office use o	only)
Received by	Date:	Receipt Number: