6876

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:

Subdivision Modification

Work site location and information

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Street address or location of subject	Kale Road
property	
Total size of subject property	148 Acres
Assessor tax lot numbers	062W32C/200,800,900,1000 & 062W32D/701 & 1100
Existing use structures and/or other	Vacant
improvements on site	
Zoning	RS/RMI/RMII
Comprehensive Plan Designation	Residential/Multi-Family
Project description	Modify SUB07-13A2MOD3

People information

	Name	Full Mailing Address	Phone Number and Email address
Applicant	Karl Ivanov	27375 SW Parkway Avenue Wilsonville, OR 97070	503-358-4460
Agent	Brandie Dalton Land-Use Consultant	Multi-Tech Engineering 1155 SE 13th Street, Salem Oregon 97302	503-363-9227 bdalton@mtengineering.net

Project information

Northgate NA
O Yes
⊙ No
NA Notification for Modifications are not required
O Yes
⊙ No

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 arc 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, understood and confirm all the statements listed above and throughout the application form.

Print Name: Kirs Juanov	Date: 9/1/20
address (include ZIP): 23375 Sw Parling Ave, w	1:150nu:16 012 97070
uthorized Signature:	
rint Name:	Date:

A designed and a set of the set of the	(For office use	only)
Received by JD	Date: 3/4/2021	Receipt Number: 21-104867-LD

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