

Land Use Application

(For office use only)
Permit #- 21-107584-LD

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:

Work site location and information

Street address or location of subject property	State Street	
Total size of subject property	122 Acres	
Assessor tax lot numbers	s 072W29B/200,201,300,400 and 072W29C/100,101,199,200,300,40	
Existing use structures and/or other improvements on site		
Zoning	RS/RMI/RMII/CR	
Comprehensive Plan Designation	Residential/Multi-Family/Commercial	
Project description	Modifiy CPC-ZC-PUD-SUB-ADJ19-08 Approval SUB-Modufication	

People information

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

Project information

East Lancaster NA and East Suburban NA
O Yes
No
.23
O Yes ● No
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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.

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

- 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:

I certify herein that I have read, understood and confirm all the statements listed above and throughout the application form. Authorized Signature: Print Name: Address (include ZIP): 23375 Sw Parking Ave, Wilson: 16 Authorized Signature: Print Name: Date: Address (include ZIP); (For office use only) Received by Date: Receipt Number: JD 4/22/2021 21-107584-LD

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Save the file to your computer and email to planning@cityofsalem.net.