



## Land Use Approval Extension Application

### Planning/Permit Application Center

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

503-588-6173 \* [planning@cityofsalem.net](mailto: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.

### Land use approval that extension is requested for

<b>Application type</b>	QUASI-JUDICIAL ZONE CHANGE / PARTITION
<b>Case No</b>	ZC-PAR15-04
<b>Expiration date</b>	12/18/21

### Work site location and information

<b>Street address or location of subject property</b>	3175 RIVER ROAD S, SALEM OREGON
<b>Total size of subject property</b>	1.89 acres
<b>Assessor tax lot numbers</b>	083W05AA00100
<b>Zoning</b>	CR and RA
<b>Comprehensive Plan Designation</b>	
<b>Project description</b>	

### People information

	<b>Name</b>	<b>Full Mailing Address</b>	<b>Phone Number and Email address</b>
<b>Applicant</b>	TERRENCE KAY FOR RIVER BUILDING LLC	3155 RIVER ROAD S, SUITE 150 SALEM OR 97302	503-588-1944 <a href="mailto:terrence@kaylawfirm.com">terrence@kaylawfirm.com</a>
<b>Agent</b>	TERRENCE KAY	SAME	same

### Authorization by property owner(s)/applicant

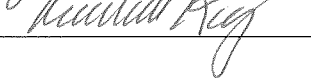
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**Authorizations:** Property owners and contract purchasers are required to authorize the filing of this application and must sign below.

- 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:

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.

Authorized Signature: 

Print Name: Terrence Kay Date: 10/8/2021

Address (include ZIP): 3155 River Rd S, #150 Salem 97302

Authorized Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address (include ZIP): \_\_\_\_\_

(For office use only)		
Received by <u>Brandon Pike</u>	Date: <u>Oct. 12, 2021</u>	Receipt Number: <u>21-119159</u>

**Not using Internet Explorer?**

Save the file to your computer and email to [planning@cityofsalem.net](mailto:planning@cityofsalem.net).