

CITY OF Salem
AT YOUR SERVICE

Traffic Engineering Section
Public Works Department
555 Liberty Street SE, Room 325 Telephone: 503-588-6211
Salem, Oregon 97301-3513 TTY: 503-588-6292

21-113071

Trip Generation Estimate

Street _____

Bin # _____ TGE # 2021059

Date Received 9-21-2021

Section 1 (To be completed by applicant.)

Applicant Name: Emerio Design: Roy Hankins, PE Telephone: 541-521-9797

Applicant Mailing Address: 2677 Willakenzie Road, Suite 1A Eugene, OR 97401

Location of New Development: 4540 Pringle Road SE
(Please provide street address. If unknown, provide approximate address and geographical description/nearest cross streets.)

Description and Size of New Development: 29.61 acre property; proposed 138-residential lot Subdivision
(e.g., 150 single-family homes, 20,000 sq. ft. office addition, 12-pump gas station, 50-student day care, additional parking, etc.)

Description and Size of Existing/Past Development, if any (note whether to remain or be removed): _____

Current property is approx. 29.61 acre; occupied with 1 farm house and accessory structures

Planning Action Involved, if any: Subdivision Building Permit Involved: _____
(e.g., zone change, subdivision, partition, conditional use, PUD, mobile home park, etc.) Yes ☒ No ☐

Section 2 (To be completed by City staff.)

Proposed Use	Existing Use
Development Quantity: <u>138 LOT SUBDIVISION</u>	Development Quantity: <u>Vacant</u>
ITE Land Use Code: <u>210-SINGLE FAM HOMES</u>	ITE Land Use Code: _____
Trip Generation Rate/Equation: <u>9.44/TRIPS/HOME</u>	Trip Generation Rate or Equation: _____
Average Daily Trips: <u>1,303</u>	Average Daily Trips: _____
ELNDT Adjustment Factors	ELNDT Adjustment Factors
Trip Length: <u>1.0</u> Linked Trip: <u>1.0</u>	Trip Length: _____ Linked Trip: _____
TSDC Trips: <u>1303</u>	TSDC Trips: _____

Section 3 (To be completed by City staff.)

Transportation Impact Analysis (TIA)	Transportation Systems Development Charge
Net Increase in Average Daily Trips: <u>1,303</u> (Proposed use minus existing use.)	Net Increase in TSDC Trips: <u>1303</u> (Proposed use minus existing use.)
<input checked="" type="checkbox"/> A TIA will be required: <input checked="" type="checkbox"/> Arterial/Collector—1000 Trip/day Threshold <input type="checkbox"/> Local Street/Alley—200 Trip/day Threshold <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> A TSDC will be required. (Fee determined by Development Services.) <u>@BP.</u>
<input type="checkbox"/> A TIA will not be required.	<input type="checkbox"/> A TSDC will not be required.

(For additional information, refer to the back of this application.)

Section 4 (To be completed by City staff.)

Remarks: TIA SUBMITTED.

Date: 10-26-2021

cc: ☐ Chief Development Services Engineer
☐ Community Development
☐ Building Permit Application
☐ _____

By: Tony