



Planning/Permit Application Center City Hall / 555 Liberty St. SE / Room 320 / Salem, OR 97301-3513 503-588-6173 \* planning@cityofsalem.net (For office use only)
Permit #:21 122532 00 ZC

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:

CLASS-2 ADJUSTMENT

#### Work site location and information

voix site ioeation and miormation			
Street address or location of subject property	5730 Lone Oak Road SE		
Total size of subject property	12.18 Acres		
Assessor tax lot numbers	083W15CB/Tax Lots 1900, 2000, 2100, and 2200		
Existing use structures and/or other improvements on site	Existing Dwellings to be Removed		
Zoning	g RA		
Comprehensive Plan Designation	Developing Residential		
Project description	60-LOT SUBDIVISION (2 LOTS DESIGNATED FOR WATER QUALITY) ADJUSTMENT TO SRC TABLE 111-2 (LOT WIDTH TO DEPTH RATIO)		

**People information** 

Name		Full Mailing Address	Phone Number and Email address	
Applicant	Raghunandan & Sangeeta	2500 Glen Eagles Road	kaminenir@hotmail.com	
	Kamineni	Lake Oswego, OR 97034		
Agent	Brandie Dalton Multi-Tech Engineering		503-363-9227	
	Land-Use Consultant	1155 13th Street SE, Salem, OR 97302	bdalton@mtengineering.net	
Paid By	Raghunandan & Sangeeta	2500 Glen Eagles Road	kaminenir@hotmail.com	
	Kamineni	Lake Oswego, OR 97034		

**Project information** 

1 Toject information	
Project Valuation for Site Plan Review	
Neighborhood Association	South Gateway NA
Have you contacted the Neighborhood Association?	⊙ Yes
	O No
Date Neighborhood Association contacted	12/5/2021
Describe contact with the affected Neighborhood Association	Via email
(The City of Salem recognizes, values, and supports the involvement of residents	VIII VIIIIII
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.)	
Have you contacted Salem-Keizer Transit?	O Yes
planning@cherriots.org	⊙ No
Date Salem-Keizer Transit contacted	
Describe contact with Salem-Keizer Transit	
Type the name and address of the Homeowners Association	N/A
(If none, type "N/A".)	

## 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:

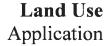
application form.	d confirm all the	
Authorized Signature:		12/5/21
Print Name: RAGHUNANDAN	KAMINE	Date:
Address (include ZIP): 2500 GLEN	EAGLES	ROAD, LAKE OSWEGO, OR 97034
Authorized Signature:		
Print Name: Sangeeta Ka	aminent	Date: 12/5/3007
Address (include ZIP): 2500 Glan		
	(For office use o	nly)
Received by	Date:	Receipt Number:
Kyle Kearns, Planner II	12/6/21	21 122532 00 ZO

Reset form

Submit (IE 11 only)

Not using Internet Explorer?

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



(For office use only)

Permit #:



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:

CLASS-2 ADJUSTMENT

### Work site location and information

Work site location and information			
Street address or location of subject property	5730 Lone Oak Road SE		
Total size of subject property	12.18 Acres		
Assessor tax lot numbers	083W15CB/Tax Lots 1900, 2000, 2100, and 2200		
Existing use structures and/or other improvements on site	Existing Dwellings to be Removed		
Zoning			
Comprehensive Plan Designation	Developing Residential		
Project description	60-LOT SUBDIVISION (2 LOTS DESIGNATED FOR WATER QUALITY) ADJUSTMENT TO SRC SECTION 803.030 (BLOCK LENGTH)		

People information

Name		Full Mailing Address	Phone Number and Email address
Applicant	Raghunandan & Sangeeta	2500 Glen Eagles Road	kaminenir@hotmail.com
	Kamineni	Lake Oswego, OR 97034	
Agent	Brandie Dalton	Multi-Tech Engineering	503-363-9227
	Land-Use Consultant	1155 13th Street SE, Salem, OR 97302	bdalton@mtengineering.net
Paid By	Raghunandan & Sangeeta	2500 Glen Eagles Road	kaminenir@hotmail.com
	Kamineni	Lake Oswego, OR 97034	

Project information

South Gateway NA
⊙ Yes
O No
12/5/2021
Via email
O Yes
⊙ No
1
N/A

# 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, understood application form.	and confirm all the		
Authorized Signature:			2521
Print Name: RAGHUNANDA	NKAMINE	Date: _	j.
Address (include ZIP): 2500 GLB	N EAGLES	ROAD, LAKE	OSWEGO OR 97034
Authorized Signature:	シィ		
Print Name: Sangeeta	Kamineni	Date:	12/5/2001
Address (include ZIP): 2500 6/0	on Eagles u	Rd Lake Osu	1850, UR 97034
	(For office use of	only)	
Received by	Date:	Receipt Number:	