

(For office use only)

Permit #: 22-106923-RP



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:

modification to SPR case #21-109485

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Work	cita	location	and	info	ematio	n

k site location and information	
Street address or location of subject property	3980 Airway Drive
Total size of subject property	9900 sq. ft.
Assessor tax lot numbers	
Existing use structures and/or other improvements on site	
Zoning	
Comprehensive Plan Designation	
Project description	Aircraft Hangar

People information

	Name	Full Mailing Address	Phone Number and Email address
Applicant	Word of Life Fellowship Church	P.O.Box 17817, Salem, OR 97305	503-463-5441
Agent	Paul Young	945 Meadowlawn Dr SE, Salem, OR 97317	503-559-0536 pyoung@wolife.org
Paid By			

Project information

Project Valuation for Site Plan Review	250.00
Neighborhood Association	
Have you contacted the Neighborhood Association?	O Yes O No
Date Neighborhood Association contacted	
Describe contact with the affected Neighborhood Association (The City of Salem recognizes, values, and supports the involvement of residents 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.)	none
Have you contacted Salem-Keizer Transit? planning@cherriots.org	O Yes O No
Date Salem-Keizer Transit contacted	
Describe contact with Salem-Keizer Transit	None
Type the name and address of the Homeowners Association (If none, type "N/A".)	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, unders application form.	stood and confirm all	the statements listed above and throughout	the
Authorized Signature:			
Print Name: Paul D. Young		Date: 3/28/22	
Address (include ZIP): 945 Meade	owlawn Dr. SE,	Salem, OR 97317	
Authorized Signature:			
Print Name:		Date:	
Address (include ZIP):			
	(For office u	se only)	
Received by	Date:	Receipt Number:	