

Land Use Application

(For office use only)

Planning/Permit Application Center

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

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.

Permit #: 503-588-6173 * planning@cityofsalem.net

Application type

Please describe the type of land use action requested:

CLASS 3 SITE PLAN REVIEW, CLASS 2 ADJUSTMENTS

Work site location and information

Street address or location of subject property	845 BASSET STREET NW			
Total size of subject property	6.57			
Assessor tax lot numbers	073W21DA 1200 and 1201			
Existing use structures and/or other improvements on site				
Zoning	IG - General Industrial			
Comprehensive Plan Designation	IND - Industrial			
Project description	2,620 SQ. FT. BUILDING ADDITION ON THE WEST SIDE OF THE BUILDING AND PARKING LOT IMPROVEMENTS			

People information

	Name	Full Mailing Address	Phone Number and Email address	
Applicant	CLUTCH INDUSTRIES, INC.	360 BELMONT STREET NE SALEM, OR 97301	office@clutchindustries.com	
Agent	ANGELA FLORES, AIA BRAND LAND USE	3095 RIVER RD N 97303 12150 JEFFERSON HWY 99E SE 97352	aflores@carlsonveit.com britany@brandlanduse.com	
Paid By	BAXTER'S NORTH AMERICA: BILL HERRING	556 MURLARK AVENUE NW SALEM, OR 97304	bill.herring@baxters.com	

Project information

1 Toject mior mation	
Project Valuation for Site Plan Review	
Neighborhood Association	West Salem Neighborhood Association
Have you contacted the Neighborhood Association?	⊙ Yes
	O No
Date Neighborhood Association contacted	7/22/2022
Describe contact with the affected Neighborhood Association	A letter describing the proposal was emailed to the
(The City of Salem recognizes, values, and supports the involvement of residents	chair and land use chair. A copy is uploaded with
in land use decisions affecting neighborhoods across the city and strongly	the application submittal.
encourages anyone requesting approval for any land use proposal to contact the	the application submittal.
affected neighborhood association(s) as early in the process as possible.)	L
Have you contacted Salem-Keizer Transit?	O Yes
planning@cherriots.org	O No
Date Salem-Keizer Transit contacted	
Describe contact with Salem-Keizer Transit	NA
Type the name and address of the Homeowners Association	NA
(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.
- 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 ar application form.	nd confirm all th	e statement	s listed above and throughout the
Authorized Signature:			
Print Name: Chris Blackburn	1		Date: 7/22/2022.
Address (include ZIP):		l	
Authorized Signature:			
Print Name:			Date:
Address (include ZIP):			
	(For office use	only)	
Received by	Date:	Receipt	Number:

Not using Internet Explorer?

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