

## **Land Use** Application

(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:

Conditional Use Permit for use of a Short-Term Rental at 795 Church St SE Salem OR 97301

## Work site location and information

Street address or location of subject property	795 Church St SE Salem OR 97301	
Total size of subject property	6264 Square Feet	
Assessor tax lot numbers	073W27DB00600	
Existing use structures and/or other improvements on site	Single-Family Residence with attached garage	
Zoning	RS / Gaiety Hill/Bush's Pasture Park Historic District	
<b>Comprehensive Plan Designation</b>	SF	
Project description	Conditional Use Permit for use of a Short-Term Rental at 795 Church St SE Salem OR 97301	

**People information** 

	Name	Full Mailing Address	Phone Number and Email address
Applicant	Brandon Fahlman Quinn Burke	295 Patterson St NW Salem OR 97304	5039302786
Agent			bfahlman@gmail.com
I alu by	Brandon Fahlman Quinn Burke	295 Patterson St NW Salem OR 97304	

**Project information** 

Project Valuation for Site Plan Review		
	0.00	
Neighborhood Association SCAN		
Have you contacted the Neighborhood Association? O Yes		
O No		
Date Neighborhood Association contacted 8/17/2022		
Describe contact with the affected Neighborhood Association  Email to Land Use Chair and Association Clauser of Science Chair and Association Chair and	Funcil to I and I los Obelia and A acceletion Obelia	
(The City of Salem recognizes, values, and supports the involvement of residents	iair	
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		
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 certify herein that I have read, understood and confirm all the statements listed above and throughout the

- § 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.
- $\S$  I (we) hereby give notice of the following concealed or unconcealed dangerous conditions on the property:

application form. Brandon Falilman. **Authorized Signature:** 493611CA627D45C... 8/25/2022 | 8:31 AM PDT Date: **Print Name**: Brandon Fahlman 295 Patterson St NW Salem OR 97304 Address (include ZIP): DocuSigned by: **Authorized Signature:** Ruinn Burte DB944B8D99554F6.. Date: 8/25/2022 | 9:02 AM PDT Print Name: Ouinn Burke 295 Patterson St NW Salem OR 97304 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.