

**Planning/Permit Application Center**

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

503-588-6173 \* [planning@cityofsalem.net](mailto: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.

**Land use approval that extension is requested for**

|                         |  |
|-------------------------|--|
| <b>Application type</b> |  |
| <b>Case No</b>          |  |
| <b>Expiration date</b>  |  |

**Work site location and information**

|   |  |
|---|--|
| <b>Street address or location of subject property</b> |  |
| <b>Total size of subject property</b>                 |  |
| <b>Assessor tax lot numbers</b>                       |  |
| <b>Zoning</b>   |  |
| <b>Comprehensive Plan Designation</b>                 |  |
| <b>Project description</b>                            |  |

**People information**

|                  | <b>Name</b> | <b>Full Mailing Address</b> | <b>Phone Number and Email address</b> |
|------------------|-------------|-----------------------------|---------------------------------------|
| <b>Applicant</b> |             |                             |                                       |
| <b>Agent</b>     |             |                             |                                       |
| <b>Paid by</b>   |             |                             |                                       |

**Authorization by property owner(s)/applicant**

**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 and confirm all the statements listed above and throughout the application form.

Authorized Signature: \_\_\_\_\_


Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address (include ZIP): \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address (include ZIP): \_\_\_\_\_

| (For office use only)   |                    |                 |
|---|--------------------|-----------------|
| Received by<br> | Date:<br>11/3/2022 | Receipt Number: |

**Not using Internet Explorer?**

Save the file to your computer and email to [planning@cityofsalem.net](mailto:planning@cityofsalem.net).