

Land Use Application Permit #: 23 102162 00 PLN

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

503-588-6213 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.

Project Description

4.57 acres at the 1900 Block of Linwood St NW, 67 unit Town Home Development, Site Plan Review, Design

Review and an adjustment for setback Class 1 Design Review

Class 2 Adjustment

Cluss 2 Rejustment

Class 2 Site Plan Review

Work site location and information

Street address of or location of subject	0 LINWOOD ST NW
property	SALEM OR 97304
Size of property (acres)	4.86
Tax Lot Number	073W16C00107
Neighborhood Association	West Salem Neighborhood Association

People information

Applicant	MARK LOWEN	3425 BOONE RD SE SALEM OR 97317	503-586-4104 mark.lowen1@gmail.com
Owner	MWSH West Salem LLC	3425 Boone Rd SE, Salem OR 97317	
Contact	MARK LOWEN	3425 BOONE RD SE SALEM OR 97317	503-586-4104 mark.lowen1@gmail.com



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Project information		
Total Project Valuation	\$ 10,050,000.00	
Site Area (Acreage)	4.86	
Comprehensive Plan	MFR	
Zoning	RM II	
Number of Class 2 Adjustments	1	
Type of Plan Check	Multi Family	
MS4 Reporting	Yes	
Existing use structures and/or other	None	
improvements on site		
Neighborhood Association Contact	Email contact with WSNA 1/16/23 with project description and site	
	plan attachment.	
Salem-Keizer Transit Contact	None	
Homeowners Association	N/A	
Land Use fees		
Description	Amount	
Site Plan Review	\$9,112.50	
Automation Surcharge	\$5.00	
Design Review - Class 1	\$671.00	
Zoning Adjustment - Class 2	\$1,807.00	

Terms and Conditions

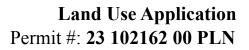
Correct information: I hereby certify I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Total Fees

\$11,595.50

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.

Indemnity: I, the permit applicant, shall indemnify, defend and hold harmless the City of Salem, its officers, employees and agents from any and all claims arising out of or in connection with work done under this permit.





Authorizations

- Property owners and contract purchasers are required to authorize the filing of this application and must sign below. This signed form must be upload with other review documents.
- 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.
- 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.

This application was electronically submitted to the City of Salem Permit Application Center by **MARK LOWEN** (PersonID: 373132) on **January 17, 2023** at **3:19 PM**.



I (we) hereby give notice of the following concealed or unconcealed dangerous conditions on the property:

I (we) certify that I (we) have read, understood, and co	onfirm all the statements listed above and throughout
the application form.	
Authorized Signature:	
Printed Name:	Date:
Address (include ZIP):	
Authorized Signature:	
Printed Name:	_
Address (include ZIP):	
Authorized Signature:	
Printed Name:	-

(For office use only)				
Received by:	Date:	Receipt Number:		