CITY OF *Salem* AT YOUR SERVICE

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

PARTITITON OF PROPERTY LOCATED AT 4151 GARDNER ROAD SE

Partition Tentative Plan

Tree Conservation Plan - Partition/Replat

Work site location and information

Street address of or location of subject property	**4151 GARDNER RD SE** **SALEM OR 97302**
Size of property (acres)	0.27
Tax Lot Number	083W10BA08100
Neighborhood Association	Faye Wright Neighborhood Association

People information

Applicant	KARL GOERTZEN	4753 FIR DELL DR SE SALEM OR 97302-4812	503-378-0952 kdgoertz1@outlook.com
Owner	BRENDAN MCMULLEN	6440 CORVALLIS RD INDEPENDENCE OR 97351	503-269-8171 brendan.mcmullen@yahoo.com
Owner	KIERAN MCMULLEN	1351 RUGE ST NW SALEM OR 97304	
Contact	KARL GOERTZEN	4753 FIR DELL DR SE SALEM OR 97302-4812	503-378-0952 kdgoertz1@outlook.com

Project information

Site Area (Acreage)	.27
Comprehensive Plan	RESIDENTIAL
Zoning	SF
Is this expedited ?	No
MS4 Reporting	No
Existing use structures and/or other improvements on site	ONE HOME
Neighborhood Association Contact	E-MAIL TO FAYE WRIGHT CHAIR AND LAND-USE CHAIR ON JANUARY 20, 2023 (E-MAIL COPY INCLUDED IN DOCUMENTS)
Salem-Keizer Transit Contact	NONE
Homeowners Association	NONE

Land Use fees

Description	Amount
Partition	$5,345.00
Tree Conservation Plan	$674.00
Automation Surcharge	$5.00
Total Fees	**$6,024.00**

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.

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 **KARL GOERTZEN** (PersonID: 178148) on **January 31, 2023** at **10:00 AM**.

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AT YOUR SERVICE

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

Authorized Signature: _____

Printed Name: _____ **Date:** _____

Address (include ZIP): _____

Authorized Signature: _____

Printed Name: _____ **Date:** _____

Address (include ZIP): _____

Authorized Signature: _____

Printed Name: _____ **Date:** _____

Address (include ZIP): _____

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