

**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**

Tearing down single family home & building a triplex Class 1 Adjustment

### Work site location and information

Street address of or location of subject property Size of property (acres) Tax Lot Number Neighborhood Association		1065 RURAL AV SE SALEM OR 97302						
		0.13 073W34AD18300 South Central Association of Neighbors (SCAN)						
					People inf	ormation		
					Applicant	CHERISE KISH	2125 PACIFIC BV SW Albany or 97321	541-905-3547 mneminvestmentsllc@gmail.com
Owner	CHERISE KISH	2125 PACIFIC BV SW Albany or 97321	541-905-3547 mneminvestmentsllc@gmail.com					
Contact	CHERISE KISH	2125 PACIFIC BV SW Albany or 97321	541-905-3547 mneminvestmentsllc@gmail.com					
Project inf	formation							
Site Area (Acreage)		.13						
Comprehensive Plan		MF						
Zoning		RM2						
Number of Class 1 Adjustments		1						
MS4 Reporting		No						
Existing use structures and/or other improvements on site		Tearing down single family home & building a triplex						
Neighborhood Association Contact		No						
		V						

Yes, emailed 12/20/22

**Salem-Keizer Transit Contact** 

**Homeowners Association** 



# Land Use Application Permit #: 23 103042 00 PLN

#### Land Use fees

Description		Amount
Automation Surcharge		\$5.00
Zoning Adjustment - Class 1		\$904.00
	<b>Total Fees</b>	\$909.00

## **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 **CHERISE KISH** (PersonID: 384653) on **January 31, 2023** at **11:01 AM**.



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 the application form.	onfirm all the statements listed above and throughout
Authorized Signature:	
Printed Name:	Date:
Address (include ZIP):	
Authorized Signature:	
Printed Name:	
Address (include ZIP):	
Authorized Signature:	
Printed Name:	
Address (include ZIP):	

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