

Land Use Application

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: PUD-Final Plan-Phase 3

Work site location and information

Street address or location of subject	State Street
property	
Total size of subject property	122
Assessor tax lot numbers	072W29B/200, 201, 300, 400 and 072W29C/100, 101, 199, 200, 300, 400
Existing use structures and/or other	Vacant
improvements on site	
Zoning	RS/RMII/CR
Comprehensive Plan Designation	Residential/Multi-Family/Commercial
Project description	PUD-Final Plan Phase 3

People information

	Name	Full Mailing Address	Phone Number and Email address
Applicant	East Park, LLC	27375 EW Porkway Ave Wilsonville, OR 97070	503-358-4460
Agent	Brandie Dalton Land-Use Consultant	Multi/Tech Engineering 1155 13th Street SE, Salem, Oregon 97302	503-363-9227 bdalton@mtengineering.net

Project information

East Lancaster NA and East Suburban NA
Q Yes
No
Not Required
1
O Yes
O No

(For office use only) Permit #

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.
- 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 arc 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: Kirs/ Juanov	Date:	
Address (include ZIP): 23375 50 Parling Ave, Wilso	muille 012 97070	
Authorized Signature:		
Print Name:	Date:	
Address (include ZIP):		

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