

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

The project proposes to construct a single twostory structure composed of four (4) separate units with driveway access along Laurel Avenue and the rear alley. The proposed structure footprint is an estimated 4,004 SF with a total floor area of 7,760 SF. Each unit will have an estimated 1,937 SF of habitable floor area with 242 SF of individual garage space. Each tenant will have their own separate covered parking and available driveway space totaling eight (8) parking spaces across the property

Class 1 Adjustment

Class 2 Adjustment

Work site location and information

Street address of or location of subject property	2605 LAUREL AV NE SALEM OR 97301
Size of property (acres)	0.20
Tax Lot Number	073W14BD03100
Neighborhood Association	Highland Neighborhood Association

People information

Applicant	LENITY ARCHITECTURE 3150 KETTLE CT SE SALEM OR 97301-5572	503-399-1090 salempermits@lenityarchitecture
Owner	FRANCISCO VILLALOBO 2628 HAPPY VALLEY WY SE SALEM OR 97317	503-932-1341 villalobosco77@gmail.com
Contact	Lee Gwyn Lee@lenityarchitecture.com	
Contact	Ron Jackson RonJ@lenityarchitecture.com	

Project information

Site Area (Acreage)	.2
Comprehensive Plan	Single Family Residential
Zoning	Single Family Residential
Number of Class 1 Adjustments	1
Number of Class 2 Adjustments	1
MS4 Reporting	Yes
Existing use structures and/or other improvements on site	None
Neighborhood Association Contact	Not Required
Salem-Keizer Transit Contact	Not Required
Homeowners Association	Not Required

Land Use fees

Description	Amount
Automation Surcharge	\$5.00
Zoning Adjustment - Class 1	\$904.00
Zoning Adjustment - Class 2	\$1,807.00
Total Fees	\$2,716.00

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 uploaded 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 **LENITY ARCHITECTURE INC** (PersonID: 331959) on **May 26, 2023** at **9:10 AM**.

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

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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: