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.

(For office use only) Permit #:

Application type

Please describe the type of land use action requested:

ADJUSTMENT CLASS-2

Work site location and information

5871 LIBERTY	
6.69Acres	
8 083W16CTax Lot (OC)	
Vacant	
RMII	
Multi-Family Residential	
SRC 702.020(d)(a)	

People information

	Name	Full Mailing Address	Phone Number and Email address
Applicant	HARRISON INDUSTRIES,	10355 LIBERTY ROAD S, SALEM, OR	503-362-4588
Agent	BRANDIE DALTON	MULTI/TECH ENGINEERING	503-363-9227

Project information

Sunnyslope NA
O Yes O No
9/2/21
Via Email
O Yes O No
NA

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 are 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: I certify herein that I have read, unde application form. Authorized Signature:	By attaching an electrical and confirm al	onic signature (whether typed, graphical or free form) I the statements listed above and throughout the	
Print Name: KWIN H	Date: 9/15/23		
Address (include ZIP):			
Authorized Signature:			
Print Name:	Date:		
Address (include ZIP):			
	(For office u	ise only)	
Received by	Date:	Receipt Number:	

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