

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.

Land use approval that extension is requested for

Application type	
Case No	
Expiration date	

Work site location and information

Street address or location of subject property	
Total size of subject property	
Assessor tax lot numbers	
Zoning	
Comprehensive Plan Designation	
Project description	

People information

	Name	Full Mailing Address	Phone Number and Email address
Applicant			
Agent			
Paid by			

Authorization by property owner(s)/applicant

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: 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: _____ **Date:** _____

Address (include ZIP): _____

Authorized Signature: _____

Print Name: _____ **Date:** _____

Address (include ZIP): _____

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