

Pa \$710
5-18-21



**CITY OF KEIZER
MAJOR & MINOR VARIANCE
APPLICATION**

If there are any questions about this application, who should be contacted?

Name: Brandi Dalton, Land-Use Consultant

Address: 1155 SE 13th St, Salem, OR 97302

Daytime Phone Number: 503-363-9227

Fax: _____ Email: bdalton@mtengineering.net

1. <u>Applicant Name</u>	<u>Address</u>
<u>Trademark Enterprises, LLC</u>	<u>PO Box 5248</u>
Phone _____	<u>Salem, OR 97304</u>

2. <u>Property Owner Name</u>	<u>Address</u>
_____	_____
Phone _____	_____

3. The owners of record of the subject property do hereby request permission for a variance to the following standard _____
lot depth - 2.102 05 (A)

4. Street Address of subject property Tepper Lane

5. Size of subject property (acres or Sq. Ft.) 2.048 acres

6. THE APPLICANT(s) SHALL CERTIFY THAT:
- A. The above variance request does not violate any deed restrictions that may be attached to or imposed upon the subject property.
 - B. If the application is approved, the applicant will exercise the rights granted in accordance with that approval and will be subject to all conditions and limitations of approval.

- C. All of the above statement and any statements included on the plot plan and exhibits attached to the plot plan are true to the best of the applicant's knowledge; and the applicant acknowledges that any permit issued on the property may be revoked if it is found that any statements are false.
- D. The applicant acknowledges that this application and all applicable policies and criteria have been read and understood, and that the requirements and criteria for approving or denying the application are also understood.

SIGNATURE(s) of APPLICANT

Ryan J. Blahut

Dated this 11th day of May, 20 21

AUTHORIZATION BY PROPERTY OWNER(s)

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 do hereby authorize filing of this application and certify that the information and exhibits herewith submitted are true and correct.

SIGNATURE

Ryan J. Blahut, manager
 Trademark Enterprises, LLC

ADDRESS & PHONE

PO Box 5248
Salem OR 97304
503-931-9588 (phone)

SIGNATURE

ADDRESS & PHONE

 _____ (phone)

FOR OFFICE USE ONLY

Township _____ Range _____ Section _____
 Tax Lot Number(s) _____
 Zone/Map _____
 Neighborhood Association _____
 Comp Map _____

Application elements submitted:
 _____ (a) Title transfer
 _____ (b) Plot Plan
 _____ (c) Statement
 _____ (d) Filing fee

Date Application Determined Complete _____

Application Accepted By _____