## Application Form for Submission of Major Subdivision or Major Land Development Plan

		Attach Additional Sheets as Needed.		
	Preapplication	Date	-	
	XMaster Plan	Date		
	Preliminary Plan	Date		
	Final Plan	Date		
1.	General Information			
	A. Assessors plat	: 291 lot(s): 45 & 74		
		pposed Subdivision or Land Development ad, Warwick, RI 02886	- Street address, if applicable:	
	C. Applicant's Na	me (Include all owners of property):		
<u>O</u>	wners and Applicants:	Artak Avagyan and Lee Beausolei	il	
	D. Applicant's Ad 100 Hay Street, West	dress and Telephone: Warwick, RI 02893		
	(401) 255-7325			
	E. Owner's Name Same as Applicant.	, Address and Telephone (if different from	• • •	
			·	
2. Representation, if applicable (Include notarized letter of authorization)				
	A. Representative	s's Name(s)		
	B. Representative	's Address and Telephone:		
<del></del>				
3.	<ol> <li>Description of Proposed Subdivision or Land Development</li> <li>3-Lot subdivision entailing 5 Proposed storage buildings totaling 70,000 square</li> </ol>			
and associated parking & infrastructure.				
			-	
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4.	Requested list of waivers from Development Review Regulations: N/A		
5.	Tax Assessors Office, if applicable I have reviewed the proposed plans and concur with the Lot numbering sequence used by Owner/Applicant.		
	Tax Assessor/ Authorized Representative / Date		
6.	Tax Collectors Office (See Certificate of Payment of Taxes Form)  Current Tax Obligation for Lot(s)Plat  Has been met by the owner for tax period ending  Has not been met by the owner. Submission is not acceptable until taxes are paid		
	Tax Collector/Authorized Representative / Date		
7.	Sewer Authority  Current Sewer Assessment for Lot(s)Plat Has been met by the owner for billing period ending  Has not been met by the owner. Submission is not acceptable until assessments are paid		
	Sewer Authority/Authorized Representative / Date		

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AP 291 Lots 45 & 74

8. Owner / Applicant's Sign	nature(s) and date	
State of Rhode Island County of		•
in <u>Cranston</u>	on the 8th day of Dece	mbers, before me personally
appeared Artak A to me known and known by me to be said Application by him/her/them ex	vagyan  pe the person(s) executing this Applic  executed to be his/her/their free act an	ation and he/she/they acknowledge d deed.
Signature:	299	
Printed Name:	serise J Pags	DENISE J FOGG Notary Public-State of Rhode Isla
My Commission expires on:	-9-2025	My Commission Expires April 09, 2025
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