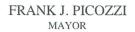
4.





## CITY OF WARWICK ZONING BOARD OF REVIEW

WARWICK, RHODE ISLAND 02886 (401) 921-9534 WARWICK ZONING BOARD OF REVIEW

Square Feet

Date APRIL 28 20 23 The undersigned hereby applies to the Warwick Zoning Board of Review for the following: ✓ DIMENSIONAL VARIANCE \_\_\_ SPECIAL USE PERMIT USE VARIANCE \_\_\_ APPEAL \_\_\_ AMENDMENT TO A PREVIOUSLY GRANTED RESOLUTION Applicant: Melissa Gamage Address: 88 Digitar 16/11 Address: Spm Owner: \_\_\_\_\_\_ Lessee: \_\_\_\_\_ Address: \_\_\_\_ 1. Ownership Tenure DATE OF PURCHASE of the above stated property by the CURRENT OWNER: Will ownership of said property be transferred by the CURRENT OWNER TO THE APPLICANT Street Address of Premises 88 Dryden B/VII) Assessor's Plat & Lot 288
Plat No. 3.

Dimensions of lot 50 /60 Area 5000

Depth

Frontage

6. DEVELOPMENTAL STATUS AND PROPOSAL
Are there any buildings on the premises at present? \(\frac{165}{}\)
If YES, how many buildings?
Identify the size, height and use of each building:
(1) HUNSE - 22 x 28/15x10 = 722 SQF 14' High
(1) House - 22 x 28/15 x 10 = 722 SQF 14' High (2) Shed - 8 x 12 = 96 SF 9' High (3) Shed - 8 x 9 = 72 SF 9' High
(3) Shed - 8 x9 = 72 SF 9' 1tigh
**Note: Use additional sheet (s) of paper, if necessary.
7. Present use of premises: frimany Residence
7. Present use of premises: frimay Residence Proposed use of premises: frimay Residence
8. Total number of RESIDENTIAL UNITS 1 Total number of COMMERICAL UNITS 0
Total number of COMMERICAL UNITS
9. Have plans for the proposed construction activities/change of use for any existing
and proposed building (s) been submitted to the Warwick Building Official?
Yes (V) No ( ) Does not apply ( )
If yes, has a building permit been refused? Yes (1) No ( )
10. Type of Sewer System - Public Private Septic Cesspool Sewers
11. Is the subject property located in a flood zone?
If so, what flood zone?
12. Is the subject property located in a Historic District?
13. Does your application required Planning Board approval?
If so, have you applied and received approval from the Planning Board
14. SPECIAL USE PERMIT
14. SPECIAL USE PERIVIT
A. State existing use of premises
P. Proposed use of the proporty in detail
B. Proposed use of the property in detail

	LIST precise ARTICLE (S) and SECTION (S) of the ZONING ORDINANCE in authorize consideration of the SPECIAL USE PERMIT described in above.
	Describe how the granting of the SPECIAL USE PERMIT will meet the requires of the Zoning Ordinance per Section 906.3 (C)
15. A.	VARIANCES - (USE OR DIMENSIONAL) State existing use of premises _ frage (Lesi dive
В.	Proposed use of the property in detail
  D.	List precise ARTICLE (S) and SECTION (S) of the ZONING ORDINANCE authorize consideration of the VARIANCE described in above.  The 2 Dim Regs Dining hom Addition Patho Roof Addition Patho Roof Addition Regs Town Regs
16.	APPEALS
Α.	Appeal of the Building Official (Attach a copy of any denial, notification, violation rrespondence relating to appeal).
	Date of denial/issuance of permit or date of alleged error in enforcement of Ordinance
	2. Basis of Appeal (Cite applicable provisions of the Ordinance).

B. Appeal to the Warwick Zoning Board of Appeals from an action of the Warwick Planning Board. (Note: Attach all copies of correspondence, plans and the written decision pertaining to the appeal, including any transcript, audiotapes, constituting the record upon which the action appealed was taken, per Section 906.4 (A) of the Ordinance.	
Basis for Appeal (Cite applicable Ordinance provisions)	
I/We the UNDERSIGNED, swear that all information provided in this APPLICATION is to the best of MY/OUR knowledge complete and correct in every detail.	
Respectfully submitted,  (Owner Signature)  (Address) S8 13 July Blvi)  (Phone) 401 - 465 5567  EMAIL: MGamage 71 (a) Jahoo. C	01
Respectfully submitted, (Applicant Signature) (Address)	
Attorney: Name:	
Address:	

\*PLEASE BE ADVISED THAT THE STREET NUMBER MUST APPEAR ON ANY EXISTING STRUCTURE

## amy.e.cota@warwickri.com

THIS APPLICATION MUST BE REVIEWED FOR COMPLETENESS BY THE BUILDING OFFICIAL PRIOR TO BEING SUBMITTED TO THE ZONING BOARD. PLEASE BE SURE TO REVIEW REQUIREMENTS CAREFULLY.

\*\*\*\*PLEASE NOTE A CLASS I SURVEY IS REQUIRED\*\*\*\*