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

RECEIVED  
WARWICK ZONING BOARD OF REVIEW  
SEP 07 2023

PETITION # 10932

Date 9-7 20 23

The undersigned hereby applies to the Warwick Zoning Board of Review for the following:

- SPECIAL USE PERMIT       DIMENSIONAL VARIANCE
- USE VARIANCE       APPEAL
- AMENDMENT TO A PREVIOUSLY GRANTED RESOLUTION

Applicant: Anthony W. DiLorenzo Address: 68 Chestnut Hill Avenue, Cranston, RI 02920  
 Owner: Anthony W. DiLorenzo Address: 68 Chestnut Hill Avenue, Cranston, RI 02920  
 Lessee: n/a Address: n/a

1. Ownership Tenure

DATE OF PURCHASE of the above stated property by the CURRENT OWNER:  
6/6/2012

Will ownership of said property be transferred by the CURRENT OWNER TO THE APPLICANT for developmental purposes? No

- 2. Street Address of Premises 85 Tollgate Road
- 3. Assessor's Plat & Lot 246, 0191  
Plat No.      Lot No.
- 4. Dimensions of lot 0/364      Area 87555.6  
Frontage      Depth      Square Feet
- 5. Zoning District in which premises is located A10/Office

6. DEVELOPMENTAL STATUS AND PROPOSAL

Are there any buildings on the premises at present? Yes \_\_\_\_\_

If YES, how many buildings? 2 \_\_\_\_\_

Identify the size, height and use of each building:

- (1) 2208 Sq. ft. apartment and doctor's office \_\_\_\_\_
- (2) 856 st. ft. detached living unit (converted garage) \_\_\_\_\_
- (3) both buildings within height dimensions \_\_\_\_\_

\*\*Note: Use additional sheet (s) of paper, if necessary.

7. Present use of premises: Apartment and a doctor's office \_\_\_\_\_

Proposed use of premises: Single Family Home \_\_\_\_\_

8. Total number of RESIDENTIAL UNITS 1 \_\_\_\_\_

Total number of COMMERCIAL UNITS 1 \_\_\_\_\_

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 ( ) No (input checked) Does not apply ( )

If yes, has a building permit been refused? Yes ( ) No (input checked)

10. Type of Sewer System - Public (input checked) Private \_\_\_\_\_  
Septic \_\_\_\_\_ Cesspool \_\_\_\_\_ Sewers \_\_\_\_\_

11. Is the subject property located in a flood zone? No \_\_\_\_\_  
If so, what flood zone? \_\_\_\_\_

12. Is the subject property located in a Historic District? No \_\_\_\_\_  
If so, have you received approval from the Historic District Commission? \_\_\_\_\_

13. Does your application required Planning Board approval? No \_\_\_\_\_  
If so, have you applied and received approval from the Planning Board \_\_\_\_\_

14. SPECIAL USE PERMIT

A. State existing use of premises Remove doctor's office use both building to be single family only. \_\_\_\_\_

B. Proposed use of the property in detail ~~Interior to be used only to remove doctor's office use.~~ \_\_\_\_\_

C. LIST precise ARTICLE (S) and SECTION (S) of the ZONING ORDINANCE which authorize consideration of the SPECIAL USE PERMIT described in above.

304.4 (only one dwelling structure on any lot)

D. Describe how the granting of the SPECIAL USE PERMIT will meet the requirements of the Zoning Ordinance per Section 906.3 (C)

use specifically authorized by ordinance and meets all criteria, previous grant authorizes 2 dwelling units

15. VARIANCES – (USE OR DIMENSIONAL)

A. State existing use of premises Doctor's office and 2 single family residential units

B. Proposed use of the property in detail Interior remodeling of main building to remove doctor's office use

C. List precise ARTICLE (S) and SECTION (S) of the ZONING ORDINANCE which authorize consideration of the VARIANCE described in above.

Table 2A 2B minimum lot frontage, lot has no frontage, access maintained through multi party driveway easement

D. Identify grounds for the proposed VARIANCE. As required in Section 906.3 (A) and 906.3 (B) of the Zoning Ordinance.

Denial would amount to more than a mere inconvenience, property has prior zoning approval and petition would make relief less intensive.

16. APPEALS

A. Appeal of the Building Official (Attach a copy of any denial, notification, violation or correspondence relating to appeal).

1. Date of denial/issuance of permit or date of alleged error in enforcement of Ordinance. \_\_\_\_\_, 20\_\_\_\_\_

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)

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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) *Anthony D. Lorenzo*  
(Address) \_\_\_\_\_  
(Phone) \_\_\_\_\_ EMAIL: \_\_\_\_\_

Respectfully submitted,

(Applicant Signature) \_\_\_\_\_  
(Address) \_\_\_\_\_  
(Phone) \_\_\_\_\_ EMAIL \_\_\_\_\_

Attorney:

Name: *Daniel K. Flaherty, Esq.*  
Address: *33 College Hill Road, Suite 200, Warwick RI 02881*  
Phone: *(401) 822-1800 ext. 213* EMAIL *ri law 101@gmail.com*

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

[amy.e.cota@warwickri.com](mailto: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\*\*\*\***