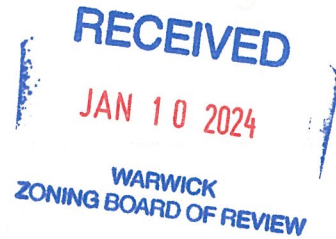


PAUL DEPETRILLO  
CHAIRMAN



FRANK J. PICOZZI  
MAYOR

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



PETITION # 10959

Date January 10 20 24

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: Fishy Biz Investments Address: 175 Metro Center Blvd. suite  
 Owner: Kurt Harrington Address: 175 Metro Center Blvd. suite 1  
 Lessee: \_\_\_\_\_ Address: \_\_\_\_\_

1. Ownership Tenure

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

July 29, 2021

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

2. Street Address of Premises 175 Metro Center Blvd. Warwick RI 02886  
Suite 1

3. Assessor's Plat & Lot \_\_\_\_\_

4. Dimensions of lot 133'  $\frac{1}{2}$ " Plat No. \_\_\_\_\_ Lot No. \_\_\_\_\_  
~~133'  $\frac{1}{2}$ "~~ 59'  $10\frac{1}{2}$ " Area 8600  
 Frontage Depth Square Feet

5. Zoning District in which premises is located \_\_\_\_\_

6. DEVELOPMENTAL STATUS AND PROPOSAL

Are there any buildings on the premises at present? Yes

If YES, how many buildings? 1

Identify the size, height and use of each building:

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

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

7. Present use of premises: \_\_\_\_\_

Proposed use of premises: \_\_\_\_\_

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

Total number of COMMERCIAL 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 ( )

No ( )

Does not apply ( )

If yes, has a building permit been refused? Yes ( ) 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? \_\_\_\_\_  
If so, have you received approval from the Historic District Commission? \_\_\_\_\_

13. Does your application required Planning Board approval? \_\_\_\_\_  
If so, have you applied and received approval from the Planning Board \_\_\_\_\_

14. SPECIAL USE PERMIT

A. Use of existing structure \_\_\_\_\_

\_\_\_\_\_

B. Extent of proposed alterations in detail \_\_\_\_\_

\_\_\_\_\_

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

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

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15. VARIANCES – (USE OR DIMENSIONAL)

A. State existing use of premises Business - "Something Fishy"

B. Extent of proposed alterations in detail # 503 - Coffee Shop  
in LI Zoning District

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

Table 1 Use Regs # 503

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

906.3 (A) (B)

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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).

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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)

(Address) 175 Metro Center Blvd Warwick

(Phone) 401 732 9970 x 115 EMAIL:

Kurte@somethingfishyinc.com

Respectfully submitted,  
(Applicant Signature)

(Address)

(Phone) \_\_\_\_\_ EMAIL \_\_\_\_\_

Attorney:

Name: Joe Shekarchi

Address: 51 Jefferson Blvd suite 400

Phone: 401-827-0100

EMAIL joe@shekarchi-law.com

Joe@shekarchi-law.com

\*PLEASE BE ADVISED THAT THE STREET NUMBER MUST APPEAR ON ALL PROPOSED FREE-STANDING SIGNS AND 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\*\*\*\***