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TOWN OF SOUTH KINGSTOWN
PLANNING BOARD
PROJECT REVIEW APPLICATION FORM



This Application Form is to be submitted with each stage of review.

APPLICANT INFORMATION

Applicant Name: Cecile Cohen
Name of Primary Contact (if applicant is an organization): _____
Applicant Address: 2300 Post Rd
Applicant Phone: 401-782-5324 Applicant Email: CCOHN110@gmail.com

OWNER INFORMATION

Owner Name(s): Staley C Smith Jr & Cecile L Cohen
Owner Contact Information: 401-782-5324

PROJECT INFORMATION

Assessor's Plat and Lot of Parcel(s) Proposed for Subdivision/Development: AP 79-2 LOT 5
Physical Address or Location of Parcel(s): 2300 POST RD
Zoning District(s) of Parcel(s): RR80 Total Size of Development Parcel: 11.68 AC
Date of Initial Meeting with Planning Department Staff (before first stage of review): 7/14/22

TYPE OF PROJECT (select all that apply)

- Development Plan Review
- Administrative Subdivision
- Minor Subdivision, without street creation or extension
- Minor Subdivision, with street creation or extension
- Major Subdivision (FLEXIBLE FRONTAGE)
- Minor Land Development Project
- Major Land Development Project
- Multi-Household Land Development Project
- Flexible Design Residential Project (FDRP)
- Residential Compound
- Comprehensive Permit

CURRENT STAGE OF REVIEW (if applicable)

- Pre-Application Concept Review
- Conceptual Master Plan
- Preliminary Plan
- Final Plan
- Recording
- Release of Performance/Maintenance Guarantee
- Change to an Approved Plan
- Reinstatement or Extension to Approved Plan
- Request to Combine Review Stages
- Other

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TOWN OF SOUTH KINGSTOWN, RI

WAIVERS AND MODIFICATIONS

Does this application request waiver of or modification to any of the requirements of the Town of South Kingstown Subdivision and Land Development Regulations? yes* no

**If yes, a statement describing the specific regulation(s) for which waiver or modification is requested must be included in the application materials.*

CERTIFICATION OF COMPLETE APPLICATION

(1) The applicant hereby certifies that all of the materials required by the applicable checklist(s), as determined by Planning Department staff during the initial meeting, have been submitted including a review fee in the amount of \$100⁰⁰ / 100.

(2) The applicant hereby certifies that the plan set and other submitted materials conform to the requirements of the current adopted version of the Town of South Kingstown Subdivision and Land Development Regulations, or, that a written statement has been provided listing all requested waivers and/or modifications of the Regulations.

Rebecca L. Cohen
Applicant Signature

9-28-22
Date

REBECCA L. COHEN
Printed Name

File

OWNER AUTHORIZATION FORM

Submittal Date: 9-28-22

Owner Authorization Forms for each owner of the property being considered for subdivision/development is to be submitted with each stage of review. If no changes to the ownership have occurred since the last stage of review, a copy of the previously submitted Form may be submitted with an updated Submittal Date.

I, SIBLEY C. SMITH & CECILE COHEN hereby certify that I am an/the owner of property designated as Plat 79-2, Lot 5, as shown on the Town of South Kingstown Tax Assessor Maps.

I further certify that I am the owner of the development rights for this property.

I hereby authorize and am in agreement with the application, signed by Cecile L Cohen (applicant), for subdivision or development for the subject property. Said application is to be submitted to the Planning Department of the Town of South Kingstown for review and decision by the Planning Board.

WITNESS its name this 20th day of September.

BY: Sibley C Smith
Cecile L Cohen Signature of Owner

STATE OF RHODE ISLAND

County of Washington

In person on the 20th day of September, before me personally appeared Sibley C Smith (name) to me known and known by me CECILE L COHEN to the party executing the foregoing instrument and acknowledged said instrument, by him/her executed, to be his/her free act and deed, as individuals (individual, corporation, trustee, partnership, non-profit, etc.).

Sandra E Botelho
Notary Public



My Commission Expires: 9-23-23

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PROJECT TEAM FORM

Submittal Date: 9-28-22

The Project Team Form is to be submitted with each stage of review. If no changes to the Project Team have occurred since the last stage of review, a copy of the previously submitted Form may be submitted with an updated Submittal Date.

ATTORNEY This entity should be copied on all project correspondence YES NO

Name: ATTY KELLY M FRACASSA

Name of Primary Contact (if attorney is an organization): _____

Address: 85 BEACH ST Bldg C - UNIT 8 WESTERLY RI 02891

Phone: 401-596-0321 Email: KELLY@NFRILAW.COM

ENGINEER This entity should be copied on all project correspondence YES NO

Name: DOWDELL ENGINEERING

Name of Primary Contact (if engineer is an organization): MARK DOWDELL, PE

Address: 3949 OLD POST RD, CHARLESTOWN RI 02813

Phone: 401-364-1027 Email: M.L.DOWDELL@GMAIL.COM

SURVEYOR This entity should be copied on all project correspondence YES NO

Name: SAME AS ENGINEER

Name of Primary Contact (if surveyor is an organization): RICHARD COUCHON, PLS

Address: _____

Phone: _____ Email: _____

LANDSCAPE ARCHITECT This entity should be copied on all project correspondence YES NO

Name: _____

Name of Primary Contact (if landscape architect is an organization): _____

Address: _____

Phone: _____ Email: _____

ARCHITECT This entity should be copied on all project correspondence YES NO

Name: _____

Name of Primary Contact (if architect is an organization): _____

Address: _____

Phone: _____ Email: _____

OTHER This entity should be copied on all project correspondence YES NO

Name: _____

Role on Project: _____

Name of Primary Contact (if entity is an organization): _____

Address: _____

Phone: _____ Email: _____

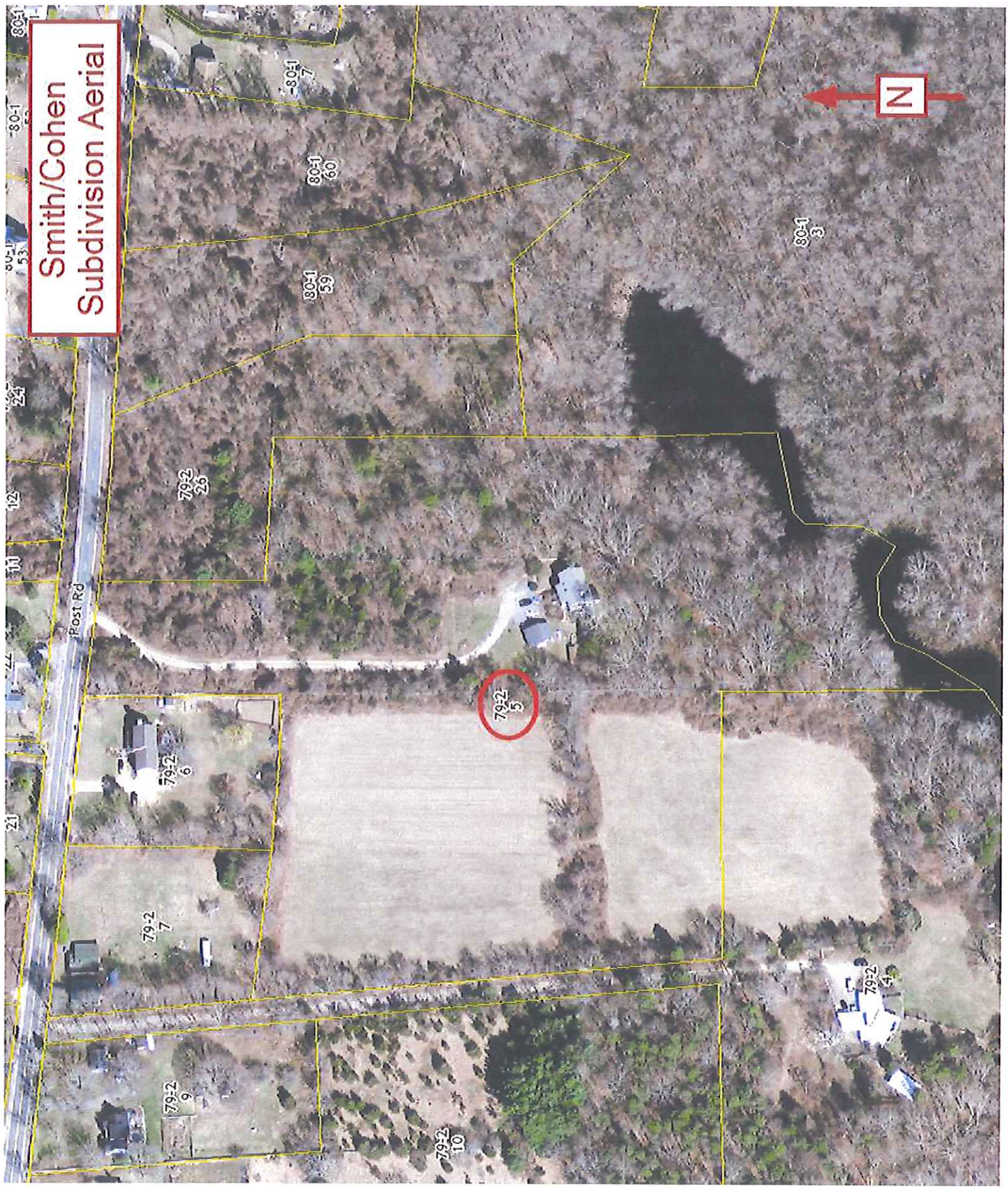
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Smith/Cohen
Subdivision Aerial



Jason my husband and I are requesting the Planning Board grant us a waiver utilizing the Town's Flexible Yield so we can create 1 additional lot in order to build a single level home for ourselves.

Due to the relatively simple nature of our subdivision request, my husband and I are respectfully requesting that the Planning Board allow us to combine the Conceptual Master & Preliminary Plan application at the next stage of review. Thank you.

Cecile Cohen
9/28/22