

**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: \_\_\_\_\_

Name of Primary Contact (if applicant is an organization): \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant Phone: \_\_\_\_\_ Applicant Email: \_\_\_\_\_

**OWNER INFORMATION**

Owner Name(s): \_\_\_\_\_

Owner Contact Information: \_\_\_\_\_

**PROJECT INFORMATION**

Assessor's Plat and Lot of Parcel(s) Proposed for Subdivision/Development: \_\_\_\_\_

Physical Address or Location of Parcel(s): \_\_\_\_\_

Zoning District(s) of Parcel(s): \_\_\_\_\_ Total Size of Development Parcel: \_\_\_\_\_

Date of Initial Meeting with Planning Department Staff (before first stage of review): \_\_\_\_\_

**TYPE OF PROJECT** (select all that apply)

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

**CURRENT STAGE OF REVIEW** (if applicable)

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

**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 \$\_\_\_\_\_.      \$200 + \$20/new unit @ 32 units = \$840

(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.

  
\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**TOWN OF SOUTH KINGSTOWN  
PLANNING BOARD  
TOWN HALL**

**Application for Comprehensive Permit  
Pursuant to the Zoning Ordinance, Subdivision Regulations (copies attached)  
and Title 45, Chapter 53 of the R. I. Gen. Laws;  
the R.I. Low & Moderate Income Housing Act**

To the Planning Board  
c/o South Kingstown Town Hall  
180 High Street, South Kingstown, RI 02879

DATE: July 31, 2020

Ladies and Gentlemen:

The undersigned hereby applies to the Planning Board for a comprehensive permit for development under the Low & Moderate Income Housing Act at the following described premises, in the manner and on the grounds hereinafter set forth.

**NAMES AND ADDRESSES**

*(Type or Print)*

Applicant: 5A Builders, LLC Address: 220 Knowlesway Extension  
City/Town: Narragansett State: RI Zip: 02882

If a corporation: \_\_\_\_\_ business or \_\_\_\_\_ non-profit; (*applicant must provide proof of incorporation and non-profit status*) Limited Liability Company X

Owner: 5A Builders, LLC Address: 220 Knowlesway Extension  
City/Town: Narragansett State: RI Zip: 02882

How long have you owned the premises? 2 years 0 months.

Lessee: N/A Address: \_\_\_\_\_  
City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**FILING INSTRUCTIONS**

- A. The original application and ten (10) copies, either typed or legibly printed, together with all supporting documents must be filed with the Administrative Officer in accordance with Section 509 of the Zoning Ordinance.
- B. A filing fee, as determined by the Administrative Officer, shall accompany an application to the Planning Board to cover the costs of processing (check made payable to the Town of South Kingstown). Said fee shall equal the cumulative fees which would be associated with approval of the project if it did not qualify for review under Section 509, as set forth in the Town's fee schedule.
- C. All required checklist items (Page 5-6) must accompany the application before the application can be certified as complete by the Administrative Officer.
- D. Four (4) copies of a separate plan and listing indicating all property owners within 200 feet of the subject property and/or all those property owners and entities which require notice under Section 45-24-53 R.I.G.L., also depicting any zoning district boundary.

Is the applicant requesting that the Planning Board grant conditional approval?

yes G or no G

**Preliminary Plan Approval**

If yes, from what State or Federal Agency is/are approval(s) pending? RIDEM Wetlands

Period of time requested? Prior to Final Plan Submission

**ELIGIBILITY**

(a) Is the applicant a public agency, nonprofit organization or limited equity housing cooperative? yes G or  no G; or

Is the applicant a private developer who will commit to a thirty (30) year covenant restricting the housing to tenants of low & moderate income?  yes G or no G; and

(b) Will the project be subsidized by the municipal, state or federal government, and have at minimum 25% of the units reserved for low & moderate income housing in accordance with R.I. Gen. Laws § 45-53-1 et seq?  yes G or no G.

Describe the form of subsidy: Density Bonuses

**THE PREMISES**

*(Type or Print)*

1. Location of Premises: Curtis Corner Road  
*(Street Number and Address)*

2. (a) Tax Assessor's Map No. 40-4 (b) Lot(s): 55  
(c) Zoning District(s) R-20

3. (a) Lot Frontage 900 +/- ft. (b) Lot Depth 1,000 +/- ft. (c) Lot Area 28.1 acres ~~sq. ft.~~

4. (a) How many buildings or structures are on the premises at present?  
*(per plot plan presented)* None.

(b) Give size of all existing buildings or structures. N/A sq. ft.;  
N/A sq. ft.; N/A sq. ft.

5. Give size of proposed building(s) / addition(s). 24 total  
30 ft. x 40 ft. = 1,200 sq. ft.;  
\_\_\_\_\_ ft. x \_\_\_\_\_ ft. = \_\_\_\_\_ sq. ft.; \_\_\_\_\_ ft. x \_\_\_\_\_ ft. = \_\_\_\_\_ sq. ft.;

6. Use of Premises: Present Vacant land Use Code \_\_\_\_\_  
Proposed Single-household detached structure Use Code 10  
Two-household detached structure Use Code 11

7. Describe extent of proposed development. *(use additional page if necessary)*  
 Subdivision of property into 24 lots. Construction of roads, utilities, drainage facilities, and landscaping. Construction of 16 single-family residences and 8 two-family residences for a total of 32 units.
8. Total number of dwelling units for which building(s) is/are to be arranged **32**
9. Total number of dwelling units which will be restricted to low and moderate income housing 8

**RELIEF SOUGHT**

10. Title of site development plan submitted pursuant to the Zoning Ordinance.  
**Preliminary Plan Submission**  
**The Village at Curtis Corner**
11. State from which particular provisions of the Zoning Ordinance and/or Subdivision Regulations relief is sought for this project. Include all exceptions, variances and waivers. *(use additional page if necessary)*  
**YOUR APPLICATION WILL NOT BE COMPLETE UNTIL THIS LIST IS VERIFIED BY THE TOWN STAFF.**

**Please see Exhibit "A"**

(a) If relief of a density requirement is sought, state allowed and proposed density.  
**16 dwelling units permitted. 32 dwelling units proposed.**

(b) If dimensional relief is sought, state number of feet from yard line you are requesting (where applicable) otherwise explain relief sought.

Front yard 20 ft. Corner side yard 10 ft.  
 Side yard #1 10 ft. Side yard #2 10 ft.  
 Rear yard 15 ft. Frontage 20 ft.

Height N/A ft. Other N/A ft

*(explain)* N/A

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(c) Other relief sought: *(use additional page if necessary)* **N/A**

The undersigned declares that the information given herein is a true statement to the best of his or her knowledge and belief.

Respectfully submitted,

*Signatures*

Applicant Tel.# 401-523-1805

Land Owner Tel.# 401-523-1805

*(if different from Applicant, signature must be provided)*

Attorney / other Tel. # John F. Kenyon, Esq.: 401-789-0217

Address: Kenyon Law Associates, LLP, 133 Old Tower Hill Rd., Ste. One, Wakefield, RI 02879

### CERTIFICATION

This application has been classified as \_\_\_\_\_ and submission requirements shall be completed in accordance with said classification based upon the attached checklist. \_\_\_\_\_ *(initial of AO)*

This application was certified as complete on this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_.

A public hearing before the Planning Board has been scheduled for \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_. In accordance with State and local law a decision of the Planning Board shall be rendered on or before the \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_, or within such further time as is agreed to by the applicant and local review board.

Administrative Officer

### AMENDMENT OF APPLICATION

An amendment to this application was submitted on this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_.

On this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ this application, as amended, was again certified as complete.

Administrative Officer

**APPENDIX  
APPLICATION CHECKLIST**

Every application to the Planning Board must be accompanied by the following:

**General Submission Requirements**

- G (i) a letter of eligibility issued by the Rhode Island Housing Mortgage Finance Corporation in accordance with 42-55-5.3(a), or, in the case of projects primarily funded by the U.S. Department of Housing and Urban Development or other state or federal agency, an award letter indicating the subsidy, or, an application in such form as may be prescribed for a municipal government subsidy; and,
- G (ii) a written request to the local review board to submit a single application to build or rehabilitate low or moderate income housing in lieu of separate applications to the applicable local boards on the application form provided. The written request shall identify the specific sections and provisions of applicable local ordinances and regulations from which the applicant is seeking relief; and,
- G (iii) a proposed timetable for the commencement of construction and completion of the project; and,
- G (iv) a sample land lease or deed restriction with affordability liens that will restrict use as low and moderate income housing in conformance with the guidelines of the agency providing the subsidy for the low and moderate income housing, but for a period of not less than thirty (30) years; and,
- G (v) identification of an approved entity that will monitor the long-term affordability of the low and moderate income units; and,
- G (vi) a financial *pro-forma* for the proposed development.

**Submission Requirements Specific To Applications Based Upon Their Classification.**

In addition to the items above, submission requirements shall include the following items based on the classification of the application as determined by the Administrative Officer.

(i) For applications seeking relief from specific provisions of the zoning ordinance or other ordinances and regulations and not involving a subdivision, those items ordinarily required by those ordinances or regulations, including but not limited to, those items on a checklist for Development Plan Review, with the exception of evidence of state or federal permits. The applicant shall provide proof of application for all required state and federal permits at the time of submission. All required state and federal permits must be obtained prior to recording of the approved plan and/or the issuance of a building permit.

(ii) For applications which include an Administrative Subdivision, those items on the checklist for an Administrative Subdivision, with the exception of evidence of state or federal permits. The applicant shall provide proof of application for all required state and federal permits at the time of submission. All required

state and federal permits must be obtained prior to recording of the approved plan.

(iii) For applications which include a Minor Land Development or Minor Subdivision, those items on the Preliminary Plan checklist, with the exception of evidence of state or federal permits. Subsequent to Preliminary Plan approval, the applicant must submit, as part of an application, those items included in the checklist for a Final Plan, with the exception of evidence of state or federal permits. The applicant shall provide proof of application for all required state and federal permits at the time of each application submission. All required state and federal permits must be obtained prior to the Final Plan approval.

(iv) An application involving a Major Land Development or Major Subdivision, shall include those items on the checklist for a Master Plan submission. Subsequent to Master Plan approval, the applicant must submit, as part of an application, those items included in the checklist for a Preliminary Plan, with the exception of evidence of state or federal permits. The applicant shall provide proof of application for all required state and federal permits at the time of each application submission. All required state and federal permits must be obtained prior to the Final Plan approval.

(v) Notwithstanding the submission requirements set forth above, the local review board may request additional, reasonable documentation throughout the public hearing, including, but not limited to, opinions of experts, credible evidence of application for necessary federal and/or state permits, statements and advice from other local boards and officials.

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# PROJECT TEAM FORM

Submittal Date: 7/31/20

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: Kenyon Law Associates, LLP

Name of Primary Contact (if applicant is an organization): John Kenyon, Esq.

Address: 133 Old Tower Hill Road, South Kingstown, RI 02879

Phone: (401) 789-0217 Email: jfk@kenyonlawyers.com

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

Name: DiPrete Engineering

Name of Primary Contact (if applicant is an organization): Kevin DeMers, PE

Address: Two Stafford Court, Cranston, RI 02920

Phone: (401) 943-1000 Email: kdemers@diprete-eng.com

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

Name: DiPrete Engineering

Name of Primary Contact (if applicant is an organization): Robert Babcock, PLS

Address: Two Stafford Court, Cranston, RI 02920

Phone: (401) 943-1000 Email: rbabcock@diprete-eng.com

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

Name: John C. Carter & Company

Name of Primary Contact (if applicant is an organization): John Carter

Address: 960 Boston Neck Road, Narragansett, RI 02882

Phone: (401) 783-3500 Email: jcc@johncartercompany.com

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

Name: \_\_\_\_\_

Name of Primary Contact (if applicant 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 applicant is an organization): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**OWNER AUTHORIZATION FORM**

Submittal Date: 7/31/20

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, Alex Petrucci on behalf of 5A Builders hereby certify that I am an/the owner of property designated as Plat 40-4, Lot 55, 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 \_\_\_\_\_ (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 9th day of November, 2018.

BY: [Signature]  
Signature of Owner

STATE OF RHODE ISLAND  
County of Providence

In Cranston on the 9th day of November 2018, before me personally appeared Alexander Petrucci (name) to me known and known by me to the party executing the foregoing instrument and acknowledged said instrument, by him/her executed, to be his/her free act and deed, as member (individual, corporation, trustee, partnership, non-profit, etc.).

[Signature]  
Denise J Fogg Notary Public

My Commission Expires: 4-09-21