

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: 4/9/2021

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: Christopher DePaola Address: 135 North Road
City/Town: Peace Dale State: R. I. Zip: 02879

If a corporation: _____ business or _____ non-profit; *(applicant must provide proof of incorporation and non-profit status)*

Christopher R. DePaola &

Owner: Lindsey E. Crowninshield Address: Same
City/Town: _____ State: _____ Zip: _____

How long have you owned the premises? 11 years 3 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

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

Period of time requested?

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: Requesting Density Bonus from South Kingstown

THE PREMISES

(Type or Print)

1. Location of Premises: 10 Oak Dell Road
(Street Number and Address)
2. (a) Tax Assessor's Map No. 48-3 (b) Lot(s): 111
(c) Zoning District(s)
3. (a) Lot Frontage 167.57' ft. (b) Lot Depth 68' +/- ft. (c) Lot Area 9982. SF sq. ft.
4. (a) How many buildings or structures are on the premises at present? Yes
(per plot plan presented)
(b) Give size of all existing buildings or structures. 926.+/- (2) Unit Primary. sq. ft.;
802.+/- Garage/Storage sq. ft.; _____ sq. ft.
5. Give size of proposed building(s) / addition(s). 24.0' ft. x 24.0' ft. = 576. sq. ft.;
Porch 8.0' ft. x 12' ft. = 96.+/- sq. ft.; Deck: 8.0' ft. x 12' ft. = 96.+/- sq. ft.;
6. Use of Premises: Present Residential - multi family (2) Unit (12.1) Use Code
Proposed Residential - multi family (3) Unit (12.1) Use Code

7. Describe extent of proposed development. *(use additional page if necessary)*
 Demolish Existing Garage & Storage Structure (802.sf) and Build New 24'x24' Cottage with Porch & Deck
 Cottage is proposed to add (1) Unit with (1) Bedroom.
8. Total number of dwelling units for which building(s) is/are to be arranged 3
9. Total number of dwelling units which will be restricted to low and moderate income housing 1

RELIEF SOUGHT

10. Title of site development plan submitted pursuant to the Zoning Ordinance.
 Survey Site Plan showing a Proposed New Dwelling Unit "William H. Baker Homestead" on land belonging to
 Christopher R DePaolo & Lindsey E Crowninshield A.P.48-3 / Lot 1-11 situated in the Town of South
 Kingstown, R.I. March 31, 2021 Scale: 1"=20' Prepared By Easterbrooks & Associates, LLC ...Saunderstown, RI
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. R-10 Zoning Regulations allows for (2) Units**

(a) If relief of a density requirement is sought, state allowed and proposed density. (2) Units Allowed
 (3) 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 _____ ft. Corner side yard _____ ft.
 Side yard #1 _____ ft. Side yard #2 _____ ft.
 (*) Rear yard 6.0' Proposed ft. Frontage _____ ft.
 Height _____ ft. Other _____ ft.

(explain) (*) Existing Garage is an (1) Story Accessory Structure and only requires 6' setback

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

A Waiver request of the South Kingstown "Subdivision & Land Development Regulations" is Attached.

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.# (h) 401.789-2942

Land Owner Tel.# (m) 401.226-6293

(if different from Applicant, signature must be provided)

Attorney / other Tel. # (w) 401.667-7770 (m) 401.465-1919

Address: Amy N. Sonder, Surveyor
Easterbrooks & Associates, LLC
2497 Boston Neck Road - Saunderstown, RI 02874

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