



Town of West Warwick

West Warwick Arctic Village Redevelopment Agency Application

Application Date: _____

Application Type*:

Arctic Village Redevelopment Agency: ___ Minor ___ Major

Mill Re-Use: ___ Minor ___ Major

Arctic Design Control District: ___ Minor ___ Major

Other (Specify): _____

*All Minor applications: \$50 fee All Major applications: \$500 fee

(Fees made payable to: **Town of West Warwick**)

Contact Information

Applicant

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Owner

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Preparer of Plans

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Attorney

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Development Information

Name of Development/ Subdivision: _____

Assessor's Plat: _____ Lot Number: _____

Existing land Use: _____

Frontage Road(s)/Street Access: _____

Current Zoning: _____

Total Acreage of Property: _____

Site will be served by Public Water? ___ Y ___ N

Site will be served by Public Sewer? ___ Y ___ N

Certification

Attest: The information provided on this application is true and accurate

Applicant's Signature: _____ Date: _____

Owner's Signature: _____ Date: _____

Approval & Review

___ Application to be reviewed and approved by Arctic Village Redevelopment Agency

___ Application has been reviewed with Administrative Approval.

Planner's Signature: _____ Date: _____