

**City of Cranston
Zoning Board of Review
Application**

Application for exception or variation under the zoning ordinance "City of Cranston Zoning Code, December 1994 Edition as amended."

To: Cranston Zoning Board of Review
35 Sockanosset Crossroad Suite 6
Cranston, RI 02920

Date: 6/19/24

THE UNDERSIGNED HEREBY APPLIES TO THE ZONING BOARD OF REVIEW FOR AN EXCEPTION OR A VARIATION IN THE APPLICATION OF THE PROVISIONS OR REGULATIONS OF THE ZONING ORDINANCE AFFECTING THE FOLLOWING DESCRIBED PREMISES IN THE MANNER AND ON THE GROUNDS HEREINAFTER SET FORTH.

OWNER: Cesar Gonzalez

ADDRESS: 15 Campbell Terrace ZIP CODE: 02860

APPLICANT: Cesar Gonzalez

ADDRESS: 15 Campbell Terrace ZIP CODE: 02860

LESSEE: N/A.

ADDRESS: _____ ZIP CODE: _____

1. ADDRESS OF PROPERTY: 12 Howard st

2. ASSESSOR'S PLAT #: 7 BLOCK #: 4 ASSESSOR'S LOT #: 128 WARD: _____

3. LOT FRONTAGE: 72 FT LOT DEPTH: 82.88 FT LOT AREA: 6021² FT

4. ZONING DISTRICT IN WHICH PROPERTY IS LOCATED: B-2 35% 35 FT
(ZONE) (AREA LIMITATION) (HEIGHT LIMITATION)

5. BUILDING HEIGHT, PRESENT: 22' 10" PROPOSED: 30' 1/2"

6. LOT COVERAGE, PRESENT: 6021² FT PROPOSED: 6021² FT

7. HOW LONG HAVE YOU OWNED THE ABOVE PREMISES? 6 months

8. ARE THERE ANY BUILDINGS ON THE PREMISES AT PRESENT? Yes

9. GIVE SIZE OF EXISTING BUILDING(S): 1155² FT

10. GIVE SIZE OF PROPOSED BUILDING(S): 1758² FT

11. WHAT IS THE PRESENT USE? Single Family Dwelling

12. WHAT IS THE PROPOSED USE? Two family Dwelling

13. NUMBER OF FAMILIES FOR WHICH BUILDING IS TO BE ARRANGED: Two (2).

14. DESCRIBE IN DETAIL THE EXTENT OF PROPOSED ALTERATIONS: Addition to Rear of Building and Requesting Change of use from Single Family to two-family Dwelling. Complete Renovation of structure as allowed by code.

15. HAVE YOU SUBMITTED PLANS TO THE BUILDING OFFICIAL? NO

16. WERE YOU REFUSED A PERMIT? NO

17. PROVISION OR REGULATION OF THE ZONING ORDINANCE OR STATE ENABLING ACT UNDER WHICH APPLICATION FOR EXCEPTION OR VARIANCE IS MADE.

18. STATE GROUNDS FOR EXCEPTION OR VARIANCE IN THIS CASE:

SIGNATURE OF APPELLANT(S) AND ATTORNEY (IF APPLICABLE) IS REQUIRED AND MUST BE LEGIBLE.

RESPECTFULLY SUBMITTED,

[Signature]
(OWNER SIGNATURE)

914 278 4249
(PHONE NUMBER)

(OWNER SIGNATURE)

(PHONE NUMBER)

[Signature]
(APPLICANT SIGNATURE)

914 278 4249
(PHONE NUMBER)

(LESSEE SIGNATURE)

(PHONE NUMBER)

(ATTORNEY SIGNATURE)

(PHONE NUMBER)

(ATTORNEY NAME-PLEASE PRINT)

ATTORNEY ADDRESS: _____

PRE-ZONING APPLICATION MEETING: _____ (PLANNING DEPT. SIGNATURE) _____ (DATE)