



Town of South Kingstown, Rhode Island

BUILDING AND ZONING DEPARTMENT

180 High Street
Wakefield, RI 02879
Tel (401) 789-9331 x1224
Fax (401) 789-9792

DEED RESTRICTION ACCESSORY APARTMENT *Pursuant to Section 503.2. E.5. of the South Kingstown Zoning Ordinance*

This DEED RESTRICTION is entered into as of this _____ day of _____ 20____,
by and between _____
of (address) _____
in the TOWN OF SOUTH KINGSTOWN, (herein after referred to as the "GRANTOR(S)") and the
TOWN OF SOUTH KINGSTOWN, a Rhode Island municipal corporation (the "GRANTEE").

WHEREAS, the GRANTOR(S) declares that they are the owner(s) of real estate located at (*street
#*) _____ known as Tax Assessor's Plat
_____ and Lot _____ in the Town of South Kingstown (herein after referred to as the "Premises");
and,

WHEREAS, on or about (*date*) _____ GRANTOR(S) have
agreed to designate the _____ square foot existing dwelling unit that exists on Assessor's
Plat ____, Lot ____ as an accessory apartment; and,

WHEREAS, GRANTOR(S), their successors and assigns agree to occupy either the principal
dwelling unit or the accessory dwelling unit for at least six (6) months of the year and the
accessory dwelling unit shall remain in the same ownership as the principal dwelling unit; and,

WHEREAS, GRANTOR(S) agree that such dwelling unit shall be subject to the requirements and
restrictions of Section 503.2 of the Town of South Kingstown Zoning Ordinance as adopted and
from time to time revised by the Town Council; and,

NOW THEREFORE, upon execution of this document by the GRANTOR(S) and GRANTEE, (1)
the GRANTOR(S) shall cause such Deed Restriction to be recorded and filed in the Land
Evidence Records for the Town of South Kingstown; (2) all requirements and restrictions
acknowledged herein shall be covenants running with the property and shall be binding upon the
GRANTOR(S) and its successor's and assigns; (3) said requirements and restrictions shall be
enforceable by the Town of South Kingstown; and (4) that the Town of South Kingstown shall
have the right to bring any action, in law or equity, necessary to enforce said restrictions.

IN WITNESS WHEREOF, the parties hereto each have caused this Deed Restriction to be duly executed and delivered as of the day and year set forth above. For Premises located at Tax Assessor's Plat _____ and Lot _____.

For the GRANTOR(S)

{signature of Grantor (s)}

STATE OF RHODE ISLAND

COUNTY OF _____

In _____, in said County, on this ____ day of _____, 20____,
before me personally appeared _____ to me known and
known by me to be the party executing the foregoing instrument and acknowledged said instrument, as
executed, to be a free act and deed.

Notary Public

My Commission Expires:

For the GRANTEE

Town of South Kingstown Authorized Representative

By: Wayne Pimental

Title: Building & Zoning Official,

Town of South Kingstown

STATE OF RHODE ISLAND

COUNTY OF _____

In _____, in said County, on this ____ day of _____, 20____,
before me personally appeared _____ to me known and
known by me to be the party executing the foregoing instrument and acknowledged said instrument, as
executed, to be a free act and deed.

Notary Public

My Commission Expires: