TOWN OF SOUTH KINGSTOWN
ZONING BOARD OF REVIEW APPLICATION

1. APPLICANT INFORMATION:
Applicant Name: Mark Cutch
Applicant Address: 8634 Green Street Sodus Point NY 14555
Applicant Phone: 585-721-6463
Applicant Email: McostichC@co.ca

2. OWNER INFORMATION:
Owner Name: Same
Owner Address:

3. PROJECT INFORMATION:
Physical Address: 42 Marine Rd
Assessor's Plat: 82-1
Assessors' Lot: 6
Zoning District: R-20

4. APPLICATION FOR:
Special Use Permit ______ Dimensional Variance _______ Use Variance _______ Dimensional Modification by Zoning Officer ______

5. LOT SPECIFICATIONS:
Lot Frontage: 86.15 ft
Lot Depth: 131.59 ft
Lot Area: 7967 ft²

6. USE OF PREMISES:
Present Use: ______ # of families: ______
Proposed Use: ______ # of families: ______

7. EXISTING STRUCTURES:
Number of Existing Buildings or Structures Present: 1 Home 1 Shed
Size of Existing Structures: 016 sf; 280 sf; ______ sf; ______ sf
Distance from Property Lines of Existing Structures:
<table>
<thead>
<tr>
<th>Structure 1</th>
<th>Structure 2</th>
<th>Structure 3</th>
<th>Structure 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Front Yard: 7.2 ft;</td>
<td>50% ft;</td>
<td>______ ft;</td>
<td>______ ft;</td>
</tr>
<tr>
<td>Rear Yard: 35+ ft;</td>
<td>10% ft;</td>
<td>______ ft;</td>
<td>______ ft;</td>
</tr>
<tr>
<td>Side Yard Right: 2.5 ft;</td>
<td>20% ft;</td>
<td>______ ft;</td>
<td>______ ft;</td>
</tr>
<tr>
<td>Side Yard Left: 4.4 ft;</td>
<td>40% ft;</td>
<td>______ ft;</td>
<td>______ ft;</td>
</tr>
<tr>
<td>Corner Side Yard: ______ ft;</td>
<td>______ ft;</td>
<td>______ ft;</td>
<td>______ ft;</td>
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</table>

8. WATER AND SOLID WASTE
Water: Town Water ______
Well: ______
Other ______
Waste: Town Sewer ______
Septic: ______
Other ______
9. SIZE OF PROPOSED BUILDINGS/ADDITIONS:
   Height Above Grade: 20 1/2 ft.  Number of Stories: 1

10. IF DIMENSIONAL RELIEF IS SOUGHT INDICATE THE DISTANCE REQUESTED:

11. PROVISION OF THE ZONING ORDINANCE FROM WHICH RELIEF IS SOUGHT:

Section and Use (if known):

12. DESCRIBE THE EXTENT OF PROPOSED ALTERATIONS, STATE REASONS WHY YOU ARE REQUESTING RELIEF:

    The proposed addition will provide a 2 car garage on the Basement level and 1 living, bathroom and sewing/project room on the first floor (see enclosed plan). The existing home has no garage and only one bathroom on the Second Floor without a bathtub. The existing grades are perfect for this design with grade at front line and will require very little excavation. Total area of disturbance is less than 200 sq and is less than on average of 10% over the area of disturbance. Erosion and sediment control will be 5'10' fence and vegetation and plans will provide stormwater storage for a 10 year event.

ZONING BOARD OF REVIEW RULES OF PROCEDURE ITEM K: "Reports from expert witnesses should be submitted with the application or ten (10) days prior to the hearing to give the Zoning Board sufficient review time. If a report is submitted at the time of the hearing, the Chairman may rule on whether the Zoning Board will continue to another meeting to give the Zoning Board time to review the reports."

Preparation of this Application and all necessary documentation is the sole responsibility of the Applicant. Town Staff's help in preparations of any facet of this applications, including abutter's list is for assistance only. The staff cannot give the applicant advice on the merits of the application nor can they render legal opinions.

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

Applicant Signature(s)  
Mark R. Costich

Applicant(s) Printed Name  
Mark R. Costich  
Date: 10/10/23

Attorney / Other (If applicable)  
Date:

Office Use Only

Received By:  
Payment Amt,  
Check #  
Legal Notice Mailed:  
Cert. Receipts Received:  

OWNER/AUTHORIZED AGENT AUTHORIZATION FORM  

Submittal Date: 10/10/23

The Owner/Authorized Agent Authorization Form must be completed in full and returned to the Office of the Building and Zoning Official for the Town of South Kingstown along with the Zoning Board of Review Application. Failure to submit this form will delay your application being processed.

I, Mark A. Costich, hereby certify that I am the owner/authorized agent of the property designated as Plat 82-4, Lot 7, as shown on the Town of South Kingstown Tax Assessor Maps. I further certify that I am the owner/authorized agent of the development rights for this property.

I hereby authorize and am in agreement with the application signed by ___________________________ (applicant), for the requested relief or use of the subject property. Said application is to be submitted to the Office of the Building and Zoning Official of the Town of South Kingstown for review and decision by the Zoning Board of Review. By signing this application, the Applicant(s) and Land Owner(s) give permission to the Town of South Kingstown staff and members of the Zoning Board to enter the property individually or as a group for purposes of a site inspection.

Witness its name this 10 day of October, 2023.

By: ___________________________  
Signature of Owner/Authorized Agent

STATE OF RHODE ISLAND

County of Washington

In South Kingstown on the 10 day of October, 2023, before me personally appeared Mark A. Costich (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 his (individual, corporation, trustee, partnership, non-profit, etc.)

Notary Public: ___________________________
My Commission Expires: 7-1-2026

Notary Seal:
<table>
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<tr>
<th>MAP #</th>
<th>LOT #</th>
<th>PROPERTY ADDRESS</th>
<th>OWNER NAME</th>
<th>OWNER 2 NAME</th>
<th>OWNER MAILING ADDRESS</th>
<th>CITY, STATE, ZIP</th>
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<td>WAKEFIELD, RI 02879</td>
</tr>
</tbody>
</table>
Washington County, Rhode Island

Horizontal Datum is Rhode Island State Plane Feet, NAD83.

1 inch = 100 feet

Parcel Boundaries not legally binding for title or zoning purposes.

The Town of South Kingstown makes no warranty as to the accuracy, reliability, or completeness of the information and is not responsible for any errors or omissions for results obtained from the use of the information.