

**TOWN OF SOUTH KINGSTOWN
PLANNING BOARD
PROJECT REVIEW APPLICATION FORM**

This Application Form is to be submitted with each stage of review.



APPLICANT INFORMATION

Applicant Name: Stephen Quigley & Alicia M. Cooney

Name of Primary Contact (if applicant is an organization): _____

Applicant Address: 12 Chestnut Street Boston, MA 02108

Applicant Phone: 617-827-8895 Applicant Email: acooney@monumentgroup.com

OWNER INFORMATION

Owner Name(s): Stephen Quigley Revocable Trust and Alicia M. Cooney Revocable Trust.

Owner Contact Information: 617-827-8895

PROJECT INFORMATION

Assessor's Plat and Lot of Parcel(s) Proposed for Subdivision/Development: (86-2,33); (86-2,19); (87-1, 17)

Physical Address or Location of Parcel(s): 362 Matunuck Beach Road, 0 Matunuck Beach Road (Vacant Land)

Zoning District(s) of Parcel(s): R-200 Total Size of Development Parcel: 4.58 acres

Date of Initial Meeting with Planning Department Staff (before first stage of review): 2/1/22; 3/19/24

TYPE OF PROJECT (select all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Development Plan Review | <input type="checkbox"/> Minor Land Development Project |
| <input type="checkbox"/> Administrative Subdivision | <input type="checkbox"/> Major Land Development Project |
| <input checked="" type="checkbox"/> Minor Subdivision, without street creation or extension | <input type="checkbox"/> Multi-Household Land Development Project |
| <input type="checkbox"/> Minor Subdivision, with street creation or extension | <input type="checkbox"/> Flexible Design Residential Project (FDRP) |
| <input type="checkbox"/> Major Subdivision | <input type="checkbox"/> Residential Compound |
| | <input type="checkbox"/> Comprehensive Permit |

CURRENT STAGE OF REVIEW (if applicable)

- | | |
|--|---|
| <input checked="" type="checkbox"/> Pre-Application Concept Review | <input type="checkbox"/> Release of Performance/Maintenance Guarantee |
| <input type="checkbox"/> Conceptual Master Plan | <input type="checkbox"/> Change to an Approved Plan |
| <input type="checkbox"/> Preliminary Plan | <input type="checkbox"/> Reinstatement or Extension to Approved Plan |
| <input type="checkbox"/> Final Plan | <input type="checkbox"/> Request to Combine Review Stages |
| <input type="checkbox"/> Recording | <input type="checkbox"/> Other |

RECEIVED: 11/14/24

WAIVERS AND MODIFICATIONS

Does this application request waiver of or modification to any of the requirements of the Town of South Kingstown Subdivision and Land Development Regulations? yes* no

**If yes, a statement describing the specific regulation(s) for which waiver or modification is requested must be included in the application materials.*

CERTIFICATION OF COMPLETE APPLICATION

(1) The applicant hereby certifies that all of the materials required by the applicable checklist(s), as determined by Planning Department staff during the initial meeting, have been submitted including a review fee in the amount of \$_____.

(2) The applicant hereby certifies that the plan set and other submitted materials conform to the requirements of the current adopted version of the Town of South Kingstown Subdivision and Land Development Regulations, or, that a written statement has been provided listing all requested waivers and/or modifications of the Regulations.

Alicia M. Cooney
Applicant Signature

9/30/24
Date

Alicia M. Cooney
Printed Name

OWNER AUTHORIZATION FORM

Submittal Date: _____

Owner Authorization Forms for each owner of the property being considered for subdivision/development is to be submitted with each stage of review. If no changes to the ownership have occurred since the last stage of review, a copy of the previously submitted Form may be submitted with an updated Submittal Date.

I, Alicia M. Cooney hereby certify that I am an/the owner of property designated as Plat 87-1, 86-2, Lot 17, 19,33, as shown on the Town of South Kingstown Tax Assessor Maps.

I further certify that I am the owner of the development rights for this property.

I hereby authorize and am in agreement with the application, signed by Alicia M. Cooney (applicant), for subdivision or development for the subject property. Said application is to be submitted to the Planning Department of the Town of South Kingstown for review and decision by the Planning Board.

WITNESS its name this 23 day of September, _____.

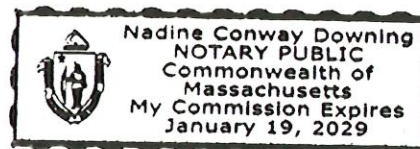
BY: Alicia M Cooney
Signature of Owner

~~STATE OF RHODE ISLAND~~ COMMONWEALTH OF MASSACHUSETTS
County of Suffolk

In _____ on the 23 day of September, 2024 before me personally appeared Alicia M. Cooney (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 Individual (individual, corporation, trustee, partnership, non-profit, etc.).

Nadine Conway Downing
Notary Public

My Commission Expires: January 19, 2029



OWNER AUTHORIZATION FORM

Submittal Date: _____

Owner Authorization Forms for each owner of the property being considered for subdivision/development is to be submitted with each stage of review. If no changes to the ownership have occurred since the last stage of review, a copy of the previously submitted Form may be submitted with an updated Submittal Date.

I, Stephen Quigley hereby certify that I am an/the owner of property designated as Plat 87-1, 86-2, Lot 17, 19,33, as shown on the Town of South Kingstown Tax Assessor Maps.

I further certify that I am the owner of the development rights for this property.

I hereby authorize and am in agreement with the application, signed by Stephen Quigley (applicant), for subdivision or development for the subject property. Said application is to be submitted to the Planning Department of the Town of South Kingstown for review and decision by the Planning Board.

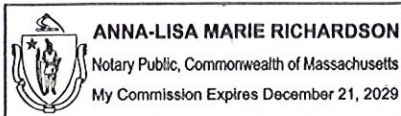
WITNESS its name this 5 day of Sept, 2024

BY: Stephen Quigley Signature of Owner

STATE OF MA RHODE ISLAND
County of Suffolk, MA

In 2024 on the 5th day of September, before me personally appeared Stephen Quigley (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 Trustee (individual, corporation, trustee, partnership, non-profit, etc.).

Anna-Lisa Marie Richardson
Notary Public



My Commission Expires: December 21, 2029