



Zoning Board of Review
Application for Zoning Hearing

Please complete this application after receiving an Official Zoning Determination from the Department of Code Enforcement.

To be completed by the Office of Planning and Economic Development

Application #: _____ Application given by: _____

Date Reviewed: _____ Receipt of Additional Documentation: _____

Certified Complete Date: _____ Certified Complete by: _____

1. Application for (see Zoning Ordinance for definitions):

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	Dimensional Variance
	Use Variance
	Special Use permit
	Application for an appeal of an administrative decision made in the enforcement or interpretation of the Zoning Ordinance or of decisions of the Planning Board or Administrative Officer on matters of review and approval of land development projects, subdivisions, or projects subject to Development Plan Review.

2. Applicant: _____

Address: _____

Phone #: _____ E-mail: _____

3. Owner (if different from above): _____

Address: _____

Phone #: _____ E-mail: _____

4. Attorney (if being retained): _____

Address: _____

Phone #: _____ E-mail: _____

5. Address of premises: _____

Assessor's Plat #: _____ Lot #: _____

6. Dimension of Lot: Width _____ Depth _____ Sq. Ft. _____ Zone: _____

7. Is there a building on the premises?(check all that apply) ____ Residential ____ Commercial ____
8. Dimensions of existing building:_____
9. Present use of premises:_____
10. Proposed use of premises: _____
11. Specifically describe relief being sought, referencing the exact Article(s) and Section(s) of the Zoning Ordinance:_____
- _____
- _____
12. Specifically describe grounds for relief being sought:_____
- _____
- _____
13. Signature of applicant:_____ date:_____
14. Relationship to Owner (if different from applicant):_____
15. Signature of Owner (if different from applicant):_____ Date:_____

Note: Each item is to be completed or marked “Non-Applicable” (N/A). \$1,000.00 filing fee must accompany completed application. Please make check/money order payable to “City of Central Falls.” All applicants must be current on all taxes and no liens may exist on the property in order to applications to be certified complete. If application involves changes to an existing building or parking or the construction of a new building or parking, please submit a site plan indicating all relevant information. The Zoning Board of Review requests four (4) site photos for all applications. All applicants must be current on all taxes and no liens may exist on the property in order to applications to be certified complete.

The submission of information required by this application does not preclude the Office of Planning and Economic Development or the Zoning Board of Review’s right to require additional information. The City does not have the ability to print or scan material larger than 11”x17.” If the applicant wishes any submitted material larger than 11”x17” to be part of the official record, a version must be submitted electronically.

The Zoning Board of Review’s decision does not address critical issues such as subdivisions or new lot recordings, leaching systems/sewers, flood plain, building codes, fire safety, DEM Wetlands and/or Coastal Resource Management Commission, nor does it guarantee that the applicant will receive the required permits or licenses. In addition, decisions authorizing a change in use may require certain building alterations in order to comply with current State and City Building Code requirements.

Application Checklist

√	Type of Document	Where
	Application	Department of Planning & Economic Development 580 Broad St. , third floor Central Falls 401-727-7480 Hours of operation: M-T 8:30am-4:30pm; F 8:30am- 1:30pm
	Zoning Determination	Department of Code Enforcement 1280 High St. Central Falls 401-727-7460 ceenforce@centralfallsri.us Hours of operation: M-T 7:30am-3:30pm; F- 7:30am- 12:00pm
	Plans (Architectural, Site)	Design Professional provides, submit with application
	Site/Building Photos (4 minimum)	Applicant provides, submit with application
	\$1000.00 Money Order/ Check addressed to "City of Central Falls"	Applicant provides, submit with application