

For office use only Application No: Date Received: Date Accepted: By:
☐ Downcity District ☐ D-1
Review: Admin DDRC Hearing Date: NR Status:

City of Providence Application for Downtown District Development Plan Review

1. General Information

Property Address:		Assessor's Plat: Lot:		
Property Name (if any):				
Owner Name:	Phone:	Email:		
Mailing Address:				
Applicant Name:	Phone:	Email:		
Mailing Address:				
Architect/Contractor Name (If Any):				
Mailing Address:				
Contact Person:	Phone:	Email:		
2. Description of Proposed Work	,			
This application is for: ☐ Development	: Plan Review ⊔ Walver ⊔ De	evelopment incentive		
Application Category (check as many	as necessary):			
☐ Repair/Replacement/Restoration	☐ Minor Alterations/Additions	☐ Major Alterations/Additions		
☐ New Construction	□ Demolition	☐ Site Improvements		
☐ Moving of Structures	☐ Public Art	☐ Temporary Use		
Waiver Category (check as many as ne	ecessary):			
☐ Development Standard ☐ Design Standard ☐ Demolition Waiver				
Briefly but completely describe the entire scope of work. For large projects, an itemized list is recommended. Attach additional pages if necessary.				

(continued on next page)

3. Documentation Submitted

The Administrative Officer will provide checklists of specific documentation required for your project (see City of Providence Land Development and Subdivision Regulations, *Appendix G: Downtown District Formal and Administrative Development Plan Review Submission Requirements*). Incomplete applications cannot be submitted for review. All documentation must be labeled and dated. All documentation will be retained by the DDRC as part of the public record. Please check off all items submitted as required documentation for your application.

☐ Photograp	hs	
	vations, and Sections (as	necessary to illustrate the project. Include existing and proposed
conditions)	vings, Product Literature,	Specifications
☐ Material/Co	<u> </u>	Specifications
	v construction projects only	()
	Data (demolition proposals	
☐ List of Prof		wner's Representatives (public hearings only. Include name,
Providence. Ca	ash not accepted.)	checks or money orders only, made payable to City of
□ Description	n of Eligibility for Incentiv	ves (see Section 603 of the Providence Zoning Ordinance).
4. List of Ab	outting Property Owner	'S
advance writte development p lines of the sub incentives, "ab complete maili (Providence Ci Abutting lots w	n notice of the meeting and plan review, "abutter" is defi pject property; streets are c autters" are those properties ng addresses are to be obt ity Hall, 25 Dorrance Street	a public meeting, all owners of abutting properties must be given d an opportunity to comment on the application. For applications for ined as any property whose lot lines touch the front, side or rear lot considered common property lines. For applications for waivers or swithin 200 feet of any lot line of the subject property. Names and tained from the most current records of the City Tax Assessor t, Providence, telephone (401) 421-7740, TDD (401) 751-0203). which the subject property is located must also be included. Attach
Plat/Lot	Street Address	Owner Name and Address (include city, state, zip code)
5. Signature	S	
		t or type name under signature. Owner's signature authorizes lic site visits during project review.
I certify that all	information contained in th	his application is true and accurate to the best of my knowledge.
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