



TOWN OF SOUTH KINGSTOWN
ZONING BOARD OF REVIEW APPLICATION



1. APPLICANT INFORMATION:

Applicant Name: JOHN & GABRIELA SPIER Name of Primary Contact if Organization: _____
Applicant Address: 177 INDIAN TRAIL SOUTH, WAKEFIELD, RI 02879
Applicant Phone: 401-207-4203 Applicant Email: JOHNSPIER@ME.COM

2. OWNER INFORMATION:

Owner Name: SAME AS APPLICANT Owner Phone: _____
Owner Address: _____

3. PROJECT INFORMATION:

Physical Address: 177 INDIAN TRAIL SO. Assessor's Plat: 34-4 Assessors' Lot: 20 Zoning District: R-80
Required Zoning Setbacks: Front yard 35 Rear Yard 35 Side Yard Right 15 Side Yard Left 15 Corner Side Yard 25

4. APPLICATION FOR:

Special Use Permit _____ Dimensional Variance Use Variance _____ Dimensional Modification by Zoning Officer _____

5. LOT SPECIFICATIONS:

Lot Frontage: 246.73 ft. Lot Depth: 143 ft. Lot Area: 20,226 ft.

6. USE OF PREMISES:

Present Use: SFD # of families: 1 Proposed Use: SAME # of families: _____

7. EXISTING STRUCTURES:

Number of Existing Buildings or Structures Present: ONE SINGLE FAMILY HOUSE

Size of Existing Structures: 894 sf; _____ sf; _____ sf; _____ sf

Distance from Property Lines of Existing Structures:

	Structure 1	Structure 2	Structure 3	Structure 4
Front Yard:	<u>25</u> ft.;	_____ ft.;	_____ ft.;	_____ ft.
Rear Yard:	<u>102</u> ft.;	_____ ft.;	_____ ft.;	_____ ft.
Side Yard Right:	<u>10</u> ft.;	_____ ft.;	_____ ft.;	_____ ft.
Side Yard Left:	<u>128</u> ft.;	_____ ft.;	_____ ft.;	_____ ft.
Corner Side Yard:	<u>N/A</u> ft.;	_____ ft.;	_____ ft.;	_____ ft.

8. WATER AND SOLID WASTE

Water: Town Water _____ Well Other _____
Waste: Town Sewer _____ Septic Other _____

9. SIZE OF PROPOSED BUILDINGS/ADDITIONS:

Total Square Feet: 200 sf. Width: 10 sf. Length: 14 sf.

Height Above Grade: 14 ft. Number of Stories: 1

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

Front Yard: _____ Rear: _____ Side Yard Right: 5'

Side Yard Left: _____ Corner Side Yard: _____ Height: _____

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

Section and Use (if known): DIMENSIONAL STANDARDS, R-80

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

WE ARE PROPOSING TO BUILD A 10'x14' STORAGE SHED, CONNECTED TO THE HOUSE BY A 10'x10' DECK, AND ACCOMODATING A 3 1/2' x 11' OUTDOOR STAIR FROM THE UPPER DECK. THE DECK WOULD INCLUDE A LATTICE ENCLOSURE FOR OUR PROPANE TANKS. THE SHED WOULD PROVIDE STORAGE FOR LAWNMOWERS, OUTBOARD MOTOR, GARDENING TOOLS, OUTDOOR FURNITURE, GAS AND OIL, AND THE OTHER TYPES OF ITEMS NOT CUSTOMARILY STORED IN A FINISHED HOME.

BECAUSE OF THE LOW GROUND LEVEL, HIGH WATER TABLE, AND LIMITED BUILDING ENVELOPE, OUR TWO BEDROOM HOME HAS VERY LIMITED STORAGE SPACE. BECAUSE OF DEM WETLANDS RESTRICTIONS, OUR PROPERTY

OFFERS NO OTHER FEASIBLE LOCATIONS FOR CREATING SPACE. WE FEEL

THAT OUR PROPOSAL WOULD BEAUTIFY OUR HOME IN NEIGHBORHOOD CHARACTER.

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) [Signature]

Applicant(s) Printed Name JOHN SPIER Date: FEB 7, 2020

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: _____

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, JOHN SPIER hereby certify that I am the owner / authorized agent of the property designated as Plat 3A-4, Lot 20, as shown on the Town of South Kingstown Tax Assessor Maps. I further certify that I am the owner / authorized agent of the developmental rights for this property.

I hereby authorize and am in agreement with the application signed by JOHN SPIER (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.

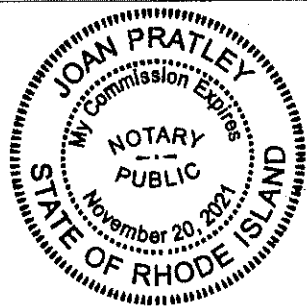
Witness its name this 7th day of FEBRUARY, 2020.

By: [Signature]
Signature of Owner/Authorized Agent

STATE OF RHODE ISLAND

County of Washington

In Narragansett on the 7 day of Feb, 2020, before me personally appeared John Spier (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, corporation, trustee, partnership, non-profit, etc.)

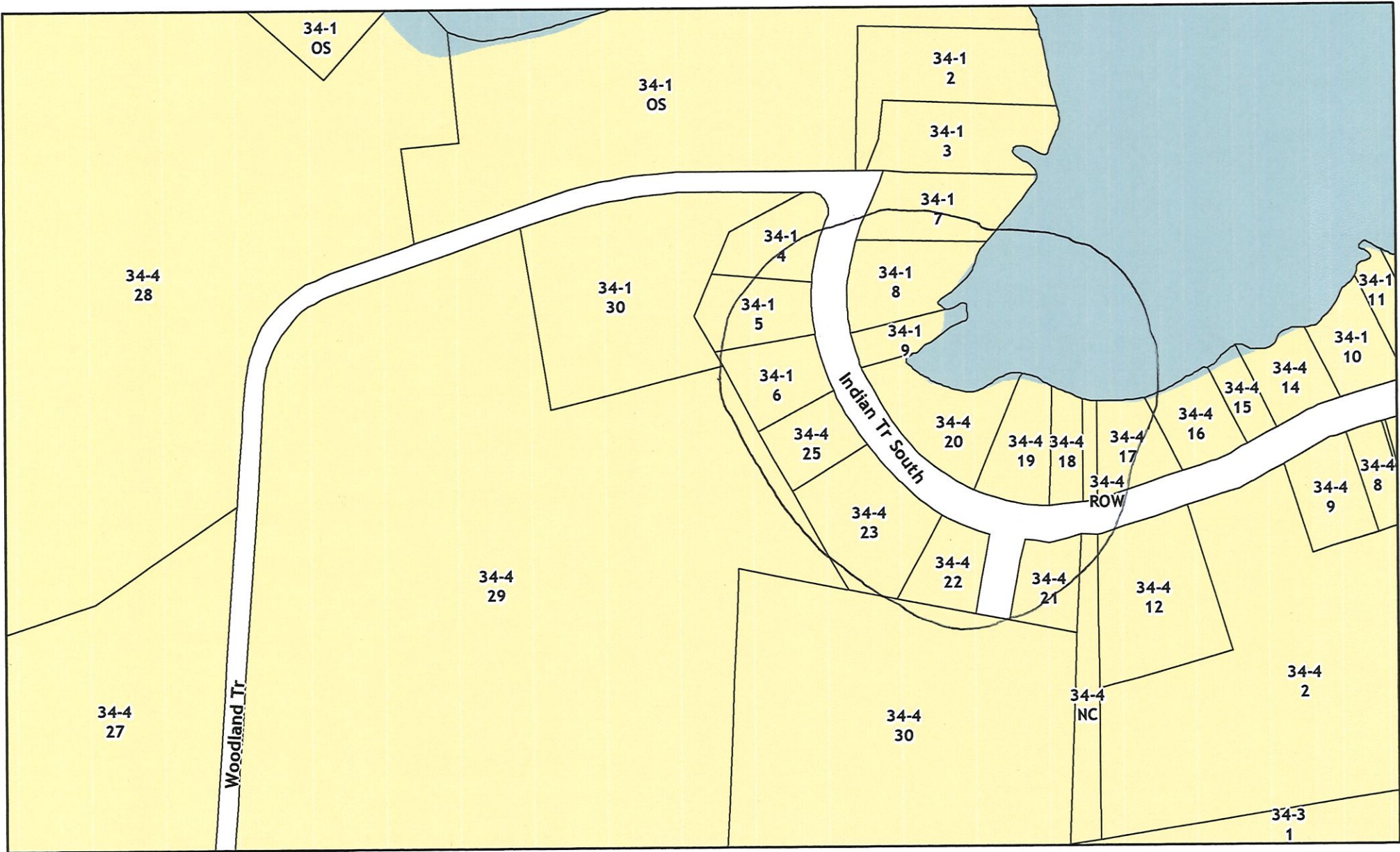


Notary Public: [Signature]
My Commission Expires: 11/20/2021

Notary Seal:

Abutters List Plat 34-4 Lot 20

34-1	7	Raymond B Reid, Jr	211 Indian Trail South	Wakefield	RI	'02879
34-1	30	Rev Paul F Amorello Trust	32 Woodland Trail	Wakefield	RI	'02879
34-1	4	Raymond B Reid, Jr	211 Indian Trail South	Wakefield	RI	'02879
34-4	29	Thomas & Angela Geary	106 Woodland Trail	Wakefield	RI	'02879
34-1	8	Raymond B Reid, Jr	211 Indian Trail South	Wakefield	RI	'02879
34-1	5	Raymond & Richard Reid	211 Indian Trail South	Wakefield	RI	'02879
34-1	9	State of RI DEM	235 Promenade St	Providence	RI	'02908
34-1	6	Heather Owens	P. O. Box 629	North Kingstown	RI	'02852
34-4	16	OS LLC	131 Walworth Ave.	White Plains	NY	10606
34-4	19	James H & Ann T Hazelwood	836 Saugatucket Road	Wakefield	RI	'02879
34-4	18	Darcy J Gee	159 Indian Trail South	Wakefield	RI	'02879
34-4	25	Nancy A Sherman	761A Curtis Corner Road	Wakefield	RI	'02879
34-4	17	Seth Feder & Ruth Glassman	59 Larch Road	East Greenwich	RI	'02818
34-4	23	Robin R Jakim & Roger L Spachman	178 Indian Trail South	Wakefield	RI	'02879
34-4	12	Peter C Desimone Jr	152 Indian Trail South	Wakefield	RI	'02879
34-4	22	Teresa Urszula Ziobro	168 Indian Trail South	Wakefield	RI	'02879
34-4	21	Carlos Prada Montoya & Diana Beltran	166 Indian Trail South	Wakefield	RI	'02879
34-4	30	Daniel J & Teresa U Ziobro	168 Indian Trail South	Wakefield	RI	'02879



Washington County, Rhode Island

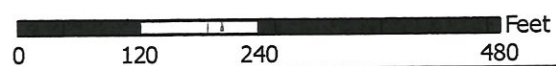
Radius Map

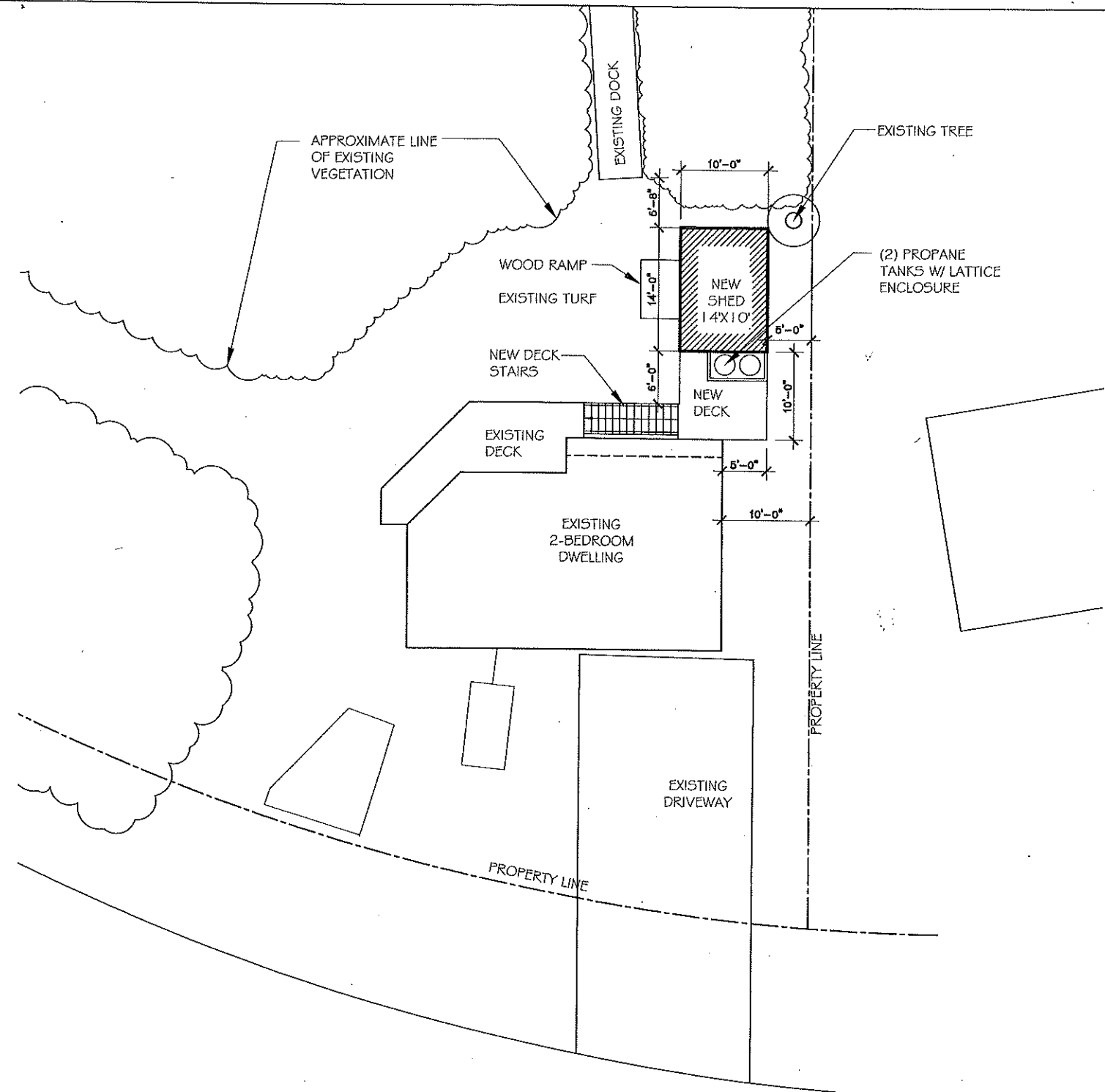
Parcel Boundaries not legally binding for title or zoning purposes.

Horizontal Datum is Rhode Island State Plane Feet, NAD83.

1 inch = 193 feet

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.





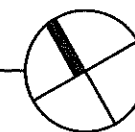
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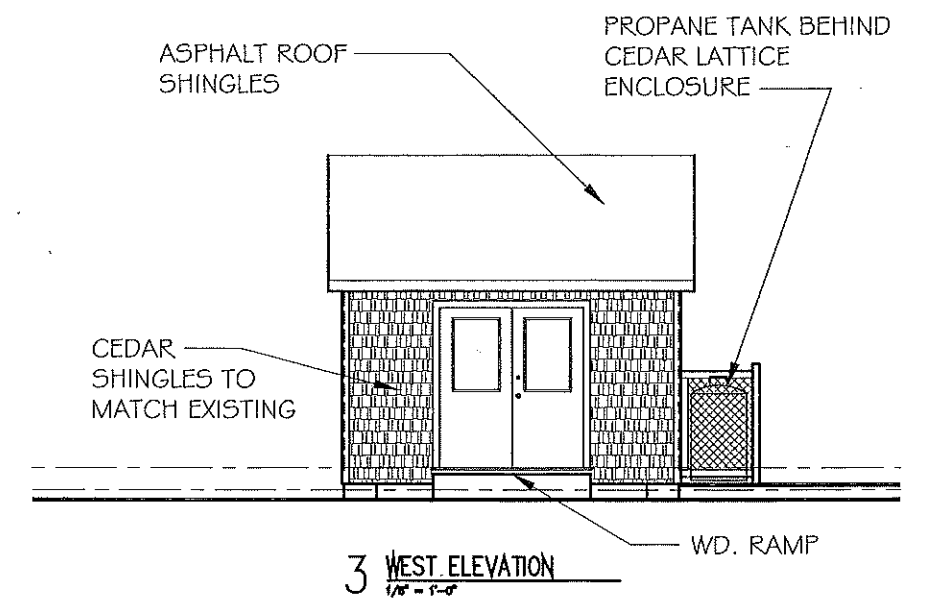
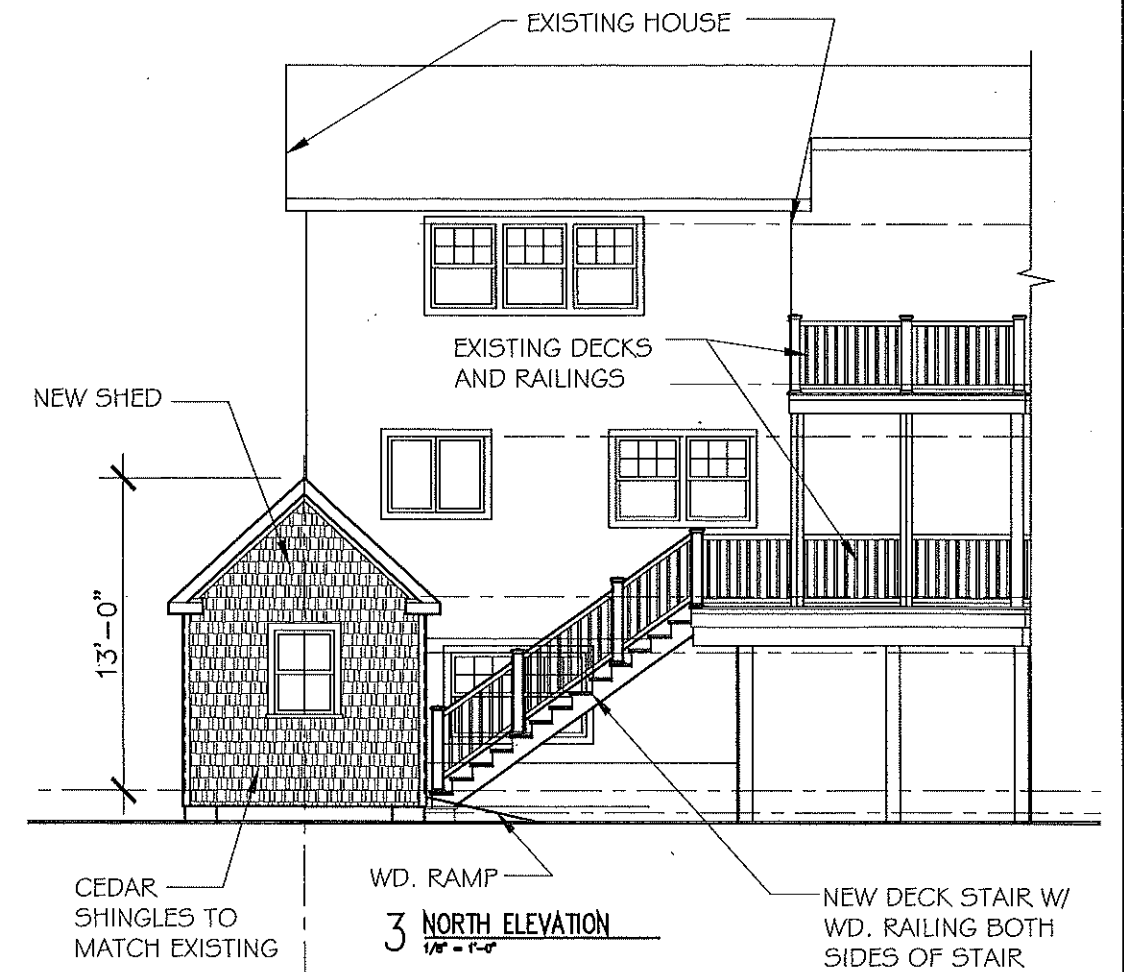
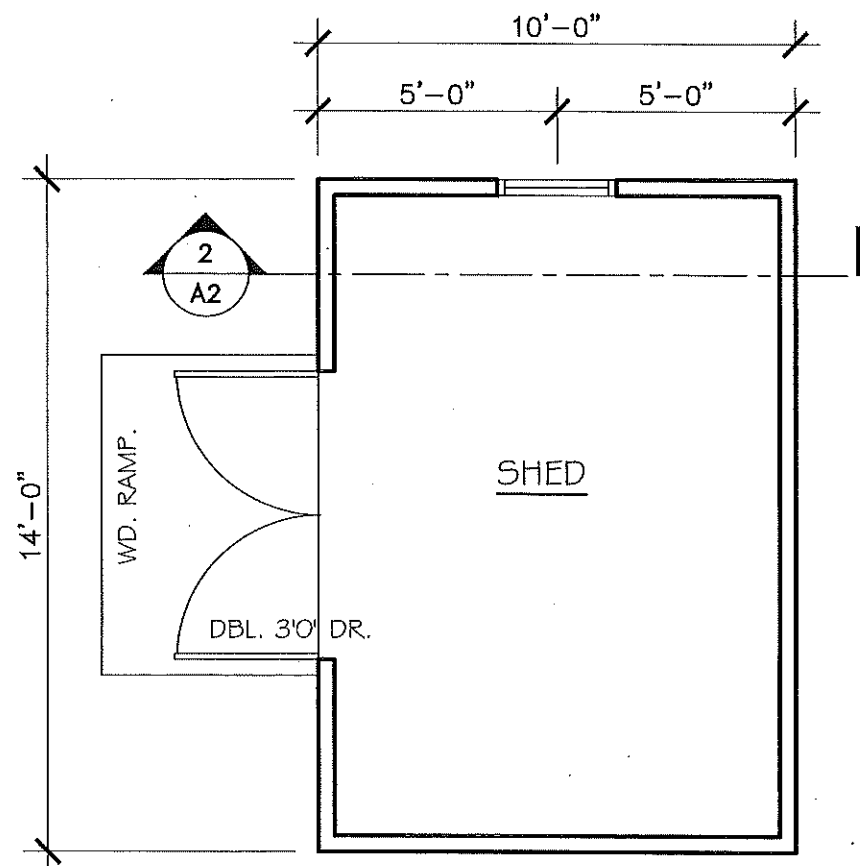
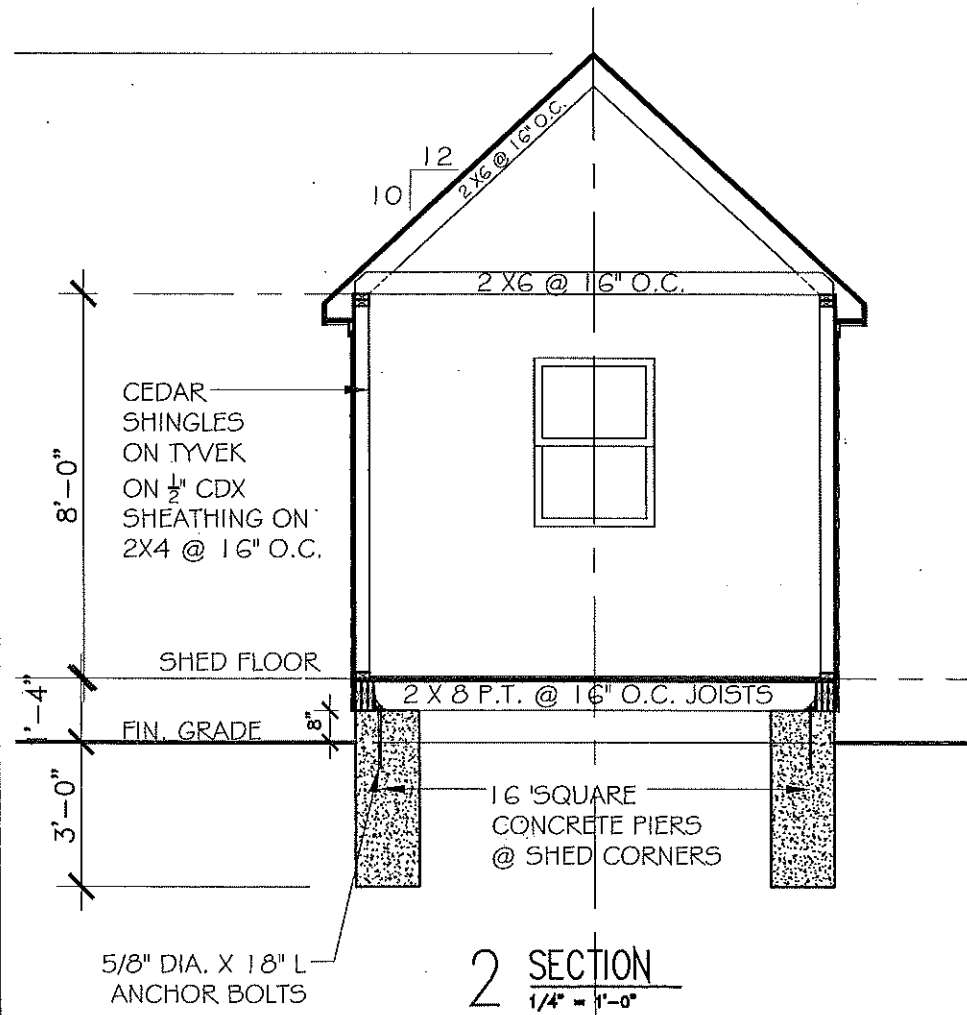
NEW SHED for John Spier
 177 Indian Trail South, Plat 34-4, Lot 20
 South Kingstown, RI

A1

SITE PLAN

1/16" = 1'-0"





Date: 01-05-2020	<p>NEW SHED for John Spier 177 Indian Trail South, Plat 34-4, Lot 20 South Kingstown, RI</p>	<h1>A2</h1>
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