



State of Rhode Island  
**Coastal Resources Management Council**  
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File Number: \_\_\_\_\_

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I hereby acknowledge and swear that this affidavit is true and accurate, and I further acknowledge that any false statements are prosecutable, and I am fully aware that the Coastal Resources Management Council may request prosecution by the Attorney General or other appropriate official of such false statements.

Signed: \_\_\_\_\_ Date \_\_\_\_\_