PRELIMINARY DETERMINATION REQUEST FORM

CHECK ACTIVITY BOX AND DESCRIBE IN DETAIL FOR WHICH CRMC STAFF LEVEL FEASIBILITY ASSESSMENT IS REQUESTED:

- [ ] RESIDENTIAL DEVELOPMENT - (SINGLE FAMILY)
- [ ] COASTAL FEATURE VERIFICATION
- [ ] NEW CONSTRUCTION
- [ ] DEMOLITION/ALTERATION
- [ ] ADDITION/ALTERATION
- [ ] RESIDENTIAL DEVELOPMENT - _______ UNITS
- [ ] PIER/DOCK: ____________ RESIDENTIAL: ____________ COMMERCIAL/OTHER: ____________
- [ ] SHORELINE PROTECTION: TYPE: ____________
- [ ] OTHER, DESCRIBE: ____________

PROPERTY INFORMATION:

| File Number (CRMC USE ONLY): | Plat: _____
|-------------------------------|-------------------|
| Project Location: | Lot(s): _____
| No. | Street | City/Town |
| Plat: | Lot(s): |
| Utility Pole: |
| Owner's Name: | Does the site have access to: |
| Mailing Address: | Public Water service: _______
| City/Town | State | Zip Code |
| Name of Waterway | Contact No.: |
| Is information available regarding riparian boundaries, channel lines, etc? (Piers, docks, etc. only) |

REQUEST FOR INFORMATION:

Name of Requestor: ____________________________________________
Mailing Address: ____________________________________________
Phone Number: ____________________________________________
Designer or other contact person(s) include name, address, phone:
__________________________________________________________

Have you knowledge of any previous permits and/or violations (Local, State, and/or Federal) on this property? If so, describe and include pertinent information:
________________________________________________________________________________
________________________________________________________________________________

Please include a general vicinity location map (street guide sheet, USGS topography sheet) and a lot map (portion of Tax Assessor’s map), map with topography is helpful.

Signature of Owner: ___________________________ Date: ___________________________

SEE REVERSE SIDE FOR INSTRUCTIONS
INSTRUCTIONS

**PLEASE NOTE** When submitting large scale plans, four (4) physical copies as well as one (1) digital copy (sent via email to cstaff1@crmc.ri.gov) are both REQUIRED. This is for submitting new applications as well as any revisions or modifications made.

** FILING FEE:

Preliminary Determination Application Fee Schedule

a. Those involving projects of the individual residential homeowner/potential homeowner: **$150.00 Determination request fee.**

b. All other projects (development of subdivisions, condominiums, commercial, industrial waterfront business, etc.) **$1,000.00 Determination Request Fee.**

c. Jurisdictional determinations: **$100.00**

d. Coastal feature verification: **$300** (Note: requires surveyed plan prepared by Rhode Island registered P.E or R.L.S.)

Note: Filing fees are not refundable.

Special Note: Determination Request fees may be applied against the filing fee of applications for Council Assent when such application is made within one (1) year of the issuance of the Preliminary Determination Request report.

** Four (4) copies of the application, plans and location map must be submitted.

** A letter from the local tax assessor stating ownership of the property must be submitted.

** The current owner must sign this request, although a potential purchaser may sign if copy of a valid sales agreement is included with the tax assessors’ letter.

** Note: This request does not constitute an application for permission to perform any activity. A CRMC Preliminary Determination Request is a determination of jurisdiction and a synopsis of which sections of the Rhode Island Coastal Resources Management Program apply to the project under consideration as presented herein.

Mail the above information to:

Attn: Applications Coordinator
Coastal Resources Management Council
Oliver Stedman Government Center
4808 Tower Hill Road; Suite 3
Wakefield, RI 02879

/ajt – 03-2020