



State of Rhode Island  
**Coastal Resources Management Council**  
Oliver H. Stedman Government Center  
4808 Tower Hill Road, Suite 3  
Wakefield, RI 02879-1900

(401) 783-3370  
Fax (401) 783-2069

## **REQUEST FOR ASSENT EXTENSION**

**Assent/Permit Number:** \_\_\_\_\_ **(including extensions)**  
**Expiration Date:** \_\_\_\_\_

**Name of Assent Holder:** \_\_\_\_\_

**Location of Project:** \_\_\_\_\_

**City/Town:** \_\_\_\_\_ **Plat:** \_\_\_\_\_

**Lot:** \_\_\_\_\_

**Name of Present Owner:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City/Town:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Indicate reason for extension request:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Indicate what (if any) work has been done:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Owner Name (PRINT)

\_\_\_\_\_  
Owner's Signature (SIGN)

Note: The applicant acknowledges by evidence of their signature that they have reviewed the Rhode Island Coastal Resources Management Program, and have, where possible adhered to the policies and standards of the program. The applicant also acknowledges by evidence of their signature that to the best of their knowledge the information contained in the application is true and valid. The filing of false information can result in the Coastal Resources Management Council revoking State Assent. Applicant requires that as a condition to the granting of this assent, members of the CRMC or its staff shall be access to the applicant's property to make on-site inspections to insure compliance with the assent. This application is made under oath and subject to penalties of perjury. 5/00

## 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](mailto:cstaff1@crmc.ri.gov)) are both required. This is for submitting new applications as well as any revisions or modifications made.

**\*\* Filing fee.**

- a. Single family residence = **\$75.00**
- b. All others = **250.00**
- c. Aquaculture renewals = **\$75.00**

**\*\* One (1) copy of the CRMC Assent.**

**\*\* One (1) copy of this form, signed by the owner.**

**\*\* If the request is by a new owner (not the original applicant), a letter from the local tax assessor stating ownership of the property must be submitted.**

Mail the above information to:

ATTN: Application Coordinator  
Coastal Resources Management Council  
Oliver H. Stedman Government Center  
4808 Tower Hill Road; Suite 3  
Wakefield, RI 02879

/ajt-03-2020