



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

**SUPPLEMENTAL DOCUMENT: ADDITIONAL APPLICANT INFORMATION AND CERTIFICATION**

This supplemental document has been created to allow for additional applicants/owners to submit their information and certification towards an RICRMC Freshwater Wetlands Application.

**PROJECT INFORMATION**

**Name of Primary Applicant/Owner:** \_\_\_\_\_

Note: The primary applicant/owner name entered here must match the name on the associated Freshwater Wetlands Application

**Primary City/Town:** \_\_\_\_\_

Note: The primary applicant/owner name entered here must match the name on the associated Freshwater Wetlands Application

**Tax Assessor's Plat(s) and Lot Number(s):** \_\_\_\_\_

**SUPPLEMENTAL APPLICANT INFORMATION AND CERTIFICATION** (Note: The applicant must be the owner of the property or easement which is the subject of this application or must be the government agency or entity with power of condemnation over such property or easement):

**Name of Applicant:** \_\_\_\_\_

**Name and Title of Representative (if Applicant is an Organization):** \_\_\_\_\_

**Applicant's Mailing Address:** \_\_\_\_\_  
 Street Number and Name or P.O. Box                      City/Town                      State                      Zip Code

**Applicant's Email Address:** \_\_\_\_\_

**Applicant's Phone Number:** \_\_\_\_\_

**STATEMENT OF DISCLOSURE AND APPLICANT AGREEMENT AS TO FEES:**

The fees which must be submitted to the Coastal Resources Management Council are based upon representations made to the Coastal Resources Management Council by the applicant. If after submission of this fee the Coastal Resources Management Council determines that an error has been made either in the applicant's submission or in determining the fee to be paid, the applicant understands that additional fees may be assessed by the Coastal Resources Management Council. These fees must be paid prior to the issuance of any assent by the Coastal Resources Management Council. The applicant understands the above conditions and agrees to comply with them. 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. Where variances or special exceptions are requested by the applicant, the applicant will be prepared to meet and present testimony on the criteria and burdens of proof for each of these relief provisions. 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. If the information provided to the CRMC for this review is inaccurate or did not reveal all necessary information or data, then the permit granted under this application may be found to be null and void. Applicant requires that as a condition to the granting of this assent, members of the CRMC or its staff shall have 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 the penalties of perjury.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_