State of Rhode Island and Providence Plantations
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

RECEIVED
8/21/2026
COASTAL RESOURCES MANAGEMENT COUNCIL

APPLICATION FOR STATE ASSENT

To perform work regulated by the provisions of Chapter 279 of the Public Laws of 1971 Amended.

Project Location: 1231 Succotash Rd Narragansett (No. Street City/Town)	File No. (CRMC USE ONLY): 2026-08-078
Owner's Name: Rhode Island Department of Environmental Management	Plat: I-J Lot(s): 66
Mailing Address: 235 Promenade Street, Providence 02908 (Address City/Town, State Zip Code)	Owner's Contact: Number: 4017529007 Email Address: chris.pearson@foth.com
Contractor RI Reg. # TBD Address: TBD	Email address: TBD Tel. No. TBD
Designer: Foth Infrastructure & Environment Address: 114 Touro Street, Newport RI 02840	Tel. No. 4012360360
Name of Waterway: Point Judith Pond	Estimated Project Cost (EPC): NA Application Fee: NA

Provide Below a Description of Work As Proposed (*required*).
See Attachment A

Have you or any previous owner filed an application for and/or received an assent for any activity on this property? (If so please provide the file and/or assent numbers): See Attachment A

Is this site within a designated historic district? ○ **YES** ○ **NO**

Is this application being submitted in response to a coastal violation? ○ **YES** ◉ **NO**

If YES, you must indicate NOV or C&D Number: _____

Name/mailing addresses of adjacent property owners whose property adjoins the project site. Accurate mailing addresses will insure proper notification. _____Applicant must initial to certify accuracy of adjacent property owners and accuracy of mailing addresses.

See Attachment A

STORMTOOLS (Http://www.beachsamp.org/resources/stormtools/) is a planning tool to help applicants evaluate the impacts of sea level rise and storm surge on their projects. The Council encourages applicants to use STORMTOOLS to help them understand the risk that may be present at their site and make appropriate adjustments to the project design.

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. 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. 08/04

Daniel Costa

Owner Name (PRINT) _____ Owner's Signature (SIGN) _____

PLEASE REVIEW REVERSE SIDE OF APPLICATION FORM

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MANAGEMENT COUNCIL

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.

	8/5/26
Owner Signature	Date

Daniel Costa, State Port Manager-RIDEM / 301 Great Island Rd Narragansett RI 02882

Print Name and Mailing Address

/ajt 03-2020