

CRANSTON, RHODE ISLAND APPLICATION FOR DEVELOPMENT PLAN REVIEW

<u>PROJECT NAME:</u>	
<u>ADDRESS:</u>	
<u>ASSESSOR'S PLAT(s):</u>	<u>LOT(s):</u>
<u>ZONING:</u>	<u>AREA:</u>

<u>OWNER:</u>	
<u>ADDRESS:</u>	<u>PHONE #:</u>
<u>APPLICANT:</u> (if different)	
<u>ADDRESS:</u>	<u>PHONE #:</u>
<u>ATTORNEY</u>	<u>PHONE #:</u>
<u>ENGINEER:</u>	<u>PHONE #:</u>
<u>SURVEYOR:</u>	<u>PHONE #:</u>
<u>LANDSCAPE ARCHITECT:</u>	<u>PHONE #:</u>

<u>PROJECT DESCRIPTION:</u>
<u>DOCUMENTS SUBMITTED:</u>

SIGNATURE OF OWNER (s)

DATE

SIGNATURE OF APPLICANCT (s)

DATE