

**APPENDIX A**  
**APPLICATION & CHECKLIST TO:**  
**ZONING BOARD OF REVIEW**  
**FOR:**  
**USE VARIANCE**



**ZONING BOARD OF REVIEW**  
**APPLICATION CHECKLIST FOR:**  
**USE VARIANCE**

The application for a Use Variance to the Zoning Board of Review must be accompanied with the following information:

- A. Three (3) copies of a site plan prepared by, and signed and stamped by, a professional engineer or professional land surveyor at a scale of no less than one (1) inch = forty (40) feet clearly showing:
- name & address of property owner(s)
  - date, north arrow, graphic scale, lot dimensions and area
  - plat & lot, zoning district(s) and setbacks
  - existing and proposed structures, and their relationship & distances from lot boundary lines
  - existing and proposed parking areas and walkways
  - existing and proposed landscaping, as it relates to the request
  - existing streets, 911 address, wells, septic system
  - list of names and addresses of all property owners within 200 feet of subject property
  - any peculiar site conditions or features
- B. Three (3) copies of a separate map indicating all property owners within 200 feet of the subject property and/or all those property owners and entities which require notice under Section 45-24-53 R.I.G.L., also depicting any zoning district boundary and uses of all neighboring properties.
- C. A soil erosion and stormwater control plan with supporting calculations based standards approved by the **USDA Soil Conservation Service** and in conformity with the R.I. Erosion and Sediment Control Handbook.
- D. A letter from a biologist indicating that there are no freshwater wetlands on or in proximity to the site such that the application is regulated by the R.I. Freshwater Wetlands

Act, a physical alteration permit issued by the R.I. Department of Environmental Management, and where applicable, the U.S. Army Corp of Engineers, shall be required.

- E. Location of existing septic system. Where construction requires approval by R.I.DEM - Division of Land Resources for a ISDS (individual sewage disposal system) or change of use permit for the proposed activity, attach a copy to the application.
- F. Traffic Study addressing the potential impacts of the proposed activity.
- G. On a separate site plan, indicate existing and proposed topography at two (2) foot intervals.
- H. Provide evidence that the proposed water supply has sufficient supply to support the proposed activity and is of drinking water quality.

**Note:** Upon the applicant's request, the Zoning Board of Review, in appropriate circumstances, may waive the provision of any items of information listed above. The specific reasons for the request of waiver of checklist items must be described on the application. The waiver(s) requested must be approved by the Zoning Board before an application without all the items listed above will be deemed complete.

**TOWN OF HOPKINTON  
ZONING BOARD OF REVIEW**

To: Hopkinton Zoning Board of Review  
Town Hall  
1 Town House Road  
Hopkinton, R.I. 02833

Ladies/Gentlemen:

The undersigned hereby applies to the Hopkinton Zoning Board of Review for a **USE VARIANCE** in the application of the provisions or regulations of the Hopkinton Zoning Ordinance affecting the following described premises in the manner and on the grounds hereinafter set forth.

NAMES:

Applicant: \_\_\_\_\_ Address: \_\_\_\_\_  
Owner: \_\_\_\_\_ Address: \_\_\_\_\_  
Lessee: \_\_\_\_\_ Address: \_\_\_\_\_

1. Filing Instructions:

- a. The original application and eleven (11) copies, either typed or legibly printed, must be filed with the Town Clerk's Office in accordance with the minimum time required to post adequate notice.
- b. A filing fee in the amount **\$50.00** shall accompany an application to the Zoning Board of Review to cover the costs of processing. In addition to the \$50.00 fee, the applicant shall also be responsible for all costs incurred by the town in the course of review of this application, including stenographic services and legal advertisement, and will be billed when the final costs have been determined.
- c. All required checklist items for a **USE VARIANCE** must accompany the application in order to be considered a complete application.

2. Location of Premises: \_\_\_\_\_  
(Name of Street or Road)

3. Plat(s) \_\_\_\_\_ Lot(s) \_\_\_\_\_ Zoning District(s) \_\_\_\_\_

911 Address: \_\_\_\_\_

4. Dimensions of Lot: (Frontage) feet by (Depth) feet Area: (Square Ft. or Acres)

5. State present use of premises: \_\_\_\_\_

6. State proposed use of premises: \_\_\_\_\_

7. Is there a building(s) on the premises at present? \_\_\_\_\_

8. How long have you owned the premises? \_\_\_\_\_

State year which lot(s) were platted and recorded: \_\_\_\_\_

9. Have you submitted plans to the Building & Zoning Inspector? \_\_\_\_\_

Has a permit been refused? \_\_\_\_\_

If a permit has been refused, attach a copy of the denial, in writing.

10. Please give the size (in feet) of all existing buildings and accessory structures:

\_\_\_\_\_

11. Please give the size (in feet) of all proposed buildings and accessory structures:

\_\_\_\_\_

12. Please describe the extent of the proposed alterations:

\_\_\_\_\_

\_\_\_\_\_

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13. Please indicate the number of families which building is to be arranged: \_\_\_\_\_

14. Indicate the provision or regulation of the Hopkinton Zoning Ordinance under which application for **USE VARIANCE** is made:

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15. Clearly state the grounds for which this **USE VARIANCE** is sought:

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16. Request of Waiver: Please indicate the checklist items that are requested to be waived by the Zoning Board and the reasons for the request:

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Respectfully submitted,

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_





**APPENDIX B**  
**APPLICATION & CHECKLIST TO:**  
**ZONING BOARD OF REVIEW**  
**FOR:**  
**DIMENSIONAL VARIANCE**



**ZONING BOARD OF REVIEW****APPLICATION CHECKLIST FOR:****DIMENSIONAL VARIANCE**

The application for a Dimensional Variance to the Zoning Board of Review must be accompanied with the following information:

- A. Three (3) copies of a site plan prepared by, and signed and stamped by, a professional engineer or professional land surveyor at a scale of no less than one (1) inch = forty (40) feet clearly showing:
- name & address of property owner(s)
  - date, north arrow, graphic scale, lot dimensions and area
  - plat & lot, zoning district(s) and setbacks
  - existing and proposed structures, and their relationship & distances from lot boundary lines
  - existing and proposed parking areas and walkways
  - existing and proposed landscaping, as it relates to the request
  - existing streets, 911 address, wells, septic system
  - list of names and addresses of all property owners within 200 feet of subject property
  - any peculiar site conditions or features
- B. Three (3) copies of a separate map indicating all property owners within 200 feet of the subject property and/or all those property owners and entities which require notice under Section 45-24-53 R.I.G.L., also depicting any zoning district boundary and uses of all neighboring properties.
- C. A letter from a biologist indicating that there are no freshwater wetlands on or in proximity to the site such that the application is regulated by the R.I. Freshwater Wetlands Act. In those instances where the application is regulated by the R.I. Freshwater Wetlands Act, a physical alteration

permit issued by the R.I. Department of Environmental Management, and where applicable, the U.S. Army Corp of Engineers, shall be required.

- D. Location of existing septic system. Where construction requires approval by R.I.DEM - Division of Land Resources for an ISDS (individual sewage disposal system) or change of use permit for the proposed activity, attach a copy to the application.
- E. On a separate site plan, indicate existing and proposed topography at two (2) foot intervals.

**Note:** Upon the applicant's request, the Zoning Board of Review, in appropriate circumstances, may waive the provision of any items of information listed above. The specific reasons for the request of waiver of checklist items must be described on the application. The waiver(s) requested must be approved by the Zoning Board before an application without all the items listed above will be deemed complete.

**TOWN OF HOPKINTON  
ZONING BOARD OF REVIEW**

To: Hopkinton Zoning Board of Review  
Town Hall  
1 Town House Road  
Hopkinton, R.I. 02833

Ladies/Gentlemen:

The undersigned hereby applies to the Hopkinton Zoning Board of Review for a **DIMENSIONAL VARIANCE** in the application of the provisions or regulations of the Hopkinton Zoning Ordinance affecting the following described premises in the manner and on the grounds hereinafter set forth.

NAMES:

Applicant: \_\_\_\_\_ Address: \_\_\_\_\_  
Owner: \_\_\_\_\_ Address: \_\_\_\_\_  
Lessee: \_\_\_\_\_ Address: \_\_\_\_\_

1. Filing Instructions:

- a. The original application and two (2) copies, either typed or legibly printed, must be filed with the Town Clerk's Office in accordance with the minimum time required to post adequate notice.
- b. A filing fee in the amount **\$50.00** shall accompany an application to the Zoning Board of Review to cover the costs of legal advertisement and processing. In addition to the \$50.00 fee, the applicant shall also be responsible for all costs incurred by the town in the course of review of this application, including stenographic services and legal advertisement, and will be billed when the final costs have been determined.
- c. All required checklist items for a **DIMENSIONAL VARIANCE** must accompany the application in order to be considered a complete application.

2. Location of Premises: \_\_\_\_\_  
(Name of Street or Road)

3. Plat(s) \_\_\_\_\_ Lot(s) \_\_\_\_\_ Zoning District(s) \_\_\_\_\_

911 Address: \_\_\_\_\_

4. Dimensions of Lot: (Frontage) feet by (Depth) feet Area: (Square Ft. or Acres)
5. State present use of premises: \_\_\_\_\_
6. State proposed use of premises: \_\_\_\_\_
7. Is there a building(s) on the premises at present? \_\_\_\_\_
8. How long have you owned the premises? \_\_\_\_\_  
State year which lot(s) were platted and recorded: \_\_\_\_\_
9. Have you submitted plans to the Building & Zoning Inspector? \_\_\_\_\_  
Has a permit been refused: \_\_\_\_\_  
If a permit has been refused, attach a copy of the denial, in writing.
10. Please give the size (in feet) of all existing buildings and accessory structures:  
  
\_\_\_\_\_
11. Please give the size (in feet) of all proposed buildings and accessory structures:  
  
\_\_\_\_\_
12. Please describe the extent of the proposed alterations:  
  
\_\_\_\_\_  
  
\_\_\_\_\_  
  
\_\_\_\_\_  
  
\_\_\_\_\_
13. Please indicate the number of families which building is to be arranged: \_\_\_\_\_

14. Indicate the provision or regulation of the Hopkinton Zoning Ordinance under which application for **DIMENSIONAL VARIANCE** is made:

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15. Clearly state the grounds for which this **DIMENSIONAL VARIANCE** is sought:

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16. Request of Waiver: Please indicate the checklist items that are requested to be waived by the Zoning Board and the reasons for the request:

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Respectfully submitted,

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

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**APPENDIX C**  
**APPLICATION & CHECKLIST TO:**  
**ZONING BOARD OF REVIEW**  
**FOR:**  
**SPECIAL USE PERMIT**



**ZONING BOARD OF REVIEW****APPLICATION CHECKLIST FOR:  
SPECIAL USE PERMIT**

The application for a Special Use Permit to the Zoning Board of Review must be accompanied with the following information:

- A. Three (3) copies of a site prepared by, and signed and stamped by, a professional engineer or professional land surveyor at a scale of no less than one (1) inch = forty (40) feet clearly showing:
- name & address of property owner(s)
  - date, north arrow, graphic scale, lot dimensions and area
  - plat & lot, zoning district(s) and setbacks
  - existing and proposed structures, and their relationship & distances from lot boundary lines
  - existing and proposed parking areas and walkways
  - existing and proposed landscaping, as it relates to the request
  - existing streets, 911 address, wells, septic system
  - list of names and addresses of all property owners within 200 feet of subject property
  - any peculiar site conditions or features
- B. Three (3) copies of a separate map indicating all property owners within 200 feet of the subject property and/or all those property owners and entities which require notice under Section 45-24-53 R.I.G.L., also depicting any zoning district boundary and uses of all neighboring properties.
- C. A soil erosion and stormwater control plan with supporting calculations based standards approved by the **USDA Soil Conservation Service** and in conformity with the R.I. Erosion and Sediment Control Handbook.
- D. A letter from a biologist indicating that there are no fresh-water wetlands on or in proximity to the site such that the application is regulated by the R.I. Freshwater Wetlands Act. In those instances where the application is regulated

by the R.I. Freshwater Wetlands Act, a physical alteration permit issued by the R.I. Department of Environmental Management, and where applicable, the U.S. Army Corp of Engineers, shall be required.

- E. Location of existing septic system. Where construction requires approval by R.I.DEM - Division of Land Resources for an ISDS (individual sewage disposal system) or change of use permit for the proposed activity, attach a copy to the application.
- F. Traffic Study addressing the potential impacts of the proposed activity.
- G. On a separate site plan, indicate existing and proposed topography at two (2) foot intervals.
- H. Provide evidence that the proposed water supply has sufficient supply to support the proposed activity and is of drinking water quality.

**Note:** Upon the applicant's request, the Zoning Board of Review, in appropriate circumstances, may waive the provision of any items of information listed above. The specific reasons for the request of waiver of checklist items must be described on the application. The waiver(s) requested must be approved by the Zoning Board before an application without all the items listed above will be deemed complete.

**TOWN OF HOPKINTON  
ZONING BOARD OF REVIEW**

To: Hopkinton Zoning Board of Review  
Town Hall  
1 Town House Road  
Hopkinton, R.I. 02833

Ladies/Gentlemen:

The undersigned hereby applies to the Hopkinton Zoning Board of Review for a **SPECIAL USE PERMIT** in the application of the provisions or regulations of the Hopkinton Zoning Ordinance affecting the following described premises in the manner and on the grounds hereinafter set forth.

NAMES:

Applicant: \_\_\_\_\_ Address: \_\_\_\_\_  
Owner: \_\_\_\_\_ Address: \_\_\_\_\_  
Lessee: \_\_\_\_\_ Address: \_\_\_\_\_

1. Filing Instructions:

- a. The original application and eleven (11) copies, either typed or legibly printed, must be filed with the Town Clerk's Office in accordance with the minimum time required to post adequate notice.
- b. A filing fee in the amount **\$75.00** shall accompany an application to the Zoning Board of Review to cover the costs of legal advertisement and processing. In addition to the \$75.00 fee, the applicant shall also be responsible for all costs incurred by the town in the course of review of this application, including stenographic services and legal advertisement, and will be billed when the final costs have been determined.
- c. All required checklist items for a **SPECIAL USE PERMIT** must accompany the application in order to be considered a complete application.

2. Location of Premises: \_\_\_\_\_  
(Name of Street or Road)

3. Plat(s) \_\_\_\_\_ Lot(s) \_\_\_\_\_ Zoning District(s) \_\_\_\_\_

911 Address: \_\_\_\_\_

4. Dimensions of Lot: (Frontage) feet by (Depth) feet Area: (Square Ft. or Acres)
5. State present use of premises: \_\_\_\_\_
6. State proposed use of premises: \_\_\_\_\_
7. Is there a building(s) on the premises at present? \_\_\_\_\_
8. How long have you owned the premises? \_\_\_\_\_  
State year which lot(s) were platted and recorded: \_\_\_\_\_
9. Have you submitted plans to the Building & Zoning Inspector? \_\_\_\_\_  
Has a permit been refused: \_\_\_\_\_  
If a permit has been refused, attach a copy of the denial, in writing.
10. Please give the size (in feet) of all existing buildings and accessory structures:  
  
\_\_\_\_\_
11. Please give the size (in feet) of all proposed buildings and accessory structures:  
  
\_\_\_\_\_
12. Please describe the extent of the proposed alterations:  
  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
13. Please indicate the number of families which building is to be arranged: \_\_\_\_\_

14. Indicate the provision or regulation of the Hopkinton Zoning Ordinance under which application for **SPECIAL USE PERMIT** is made:

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15. Clearly state the grounds for which this **SPECIAL USE PERMIT** is sought:

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16. Request of Waiver: Please indicate the checklist items that are requested to be waived by the Zoning Board and the reasons for the request:

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Respectfully submitted,

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_





**APPENDIX D**  
**APPLICATION & CHECKLIST TO:**  
**BUILDING & ZONING DEPARTMENT**  
**FOR:**  
**DIMENSIONAL MODIFICATION**

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**BUILDING AND ZONING DEPARTMENT****APPLICATION CHECKLIST FOR:****DIMENSIONAL MODIFICATION**

The application for a Dimensional Modification to the Building & Zoning Department must be accompanied with the following information:

- A. Three (3) copies of a site prepared by, and signed and stamped by, a professional engineer or professional land surveyor at a scale of no less than one (1) inch = forty (40) feet clearly showing:
  - name & address of property owner(s)
  - date, north arrow, graphic scale, lot dimensions and area
  - plat & lot, zoning district(s) and setbacks
  - existing and proposed structures, and their relationship & distances from lot boundary lines
  - existing and proposed parking areas and walkways
  - existing and proposed landscaping, as it relates to the request
  - existing streets, 911 address, wells, septic system
  - any peculiar site conditions or features
- B. Three (3) copies of a current list (show date) indicating all property owners directly abutting the subject property.
- C. A letter from a biologist indicating that there are no freshwater wetlands on or in proximity to the site such that the application is regulated by the R.I. Freshwater Wetlands Act. In those instances where the application is regulated by the R.I. Freshwater Wetlands Act, a physical alteration permit issued by the R.I. Department of Environmental Management, and where applicable, the U.S. Army Corp of Engineers, shall be required.
- D. Where proposed construction requires approval by R.I.-DEM - Division of Land Resources for an ISDS (individual sewage disposal system) or change of use permit for the

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HOPKINTON CODE

proposed activity, attach a copy to the modification application.

**TOWN OF HOPKINTON  
BUILDING & ZONING DEPARTMENT**

To: Hopkinton Building & Zoning Department  
Town Hall  
1 Town House Road  
Hopkinton, R.I. 02833

Ladies/Gentlemen:

The undersigned hereby applies to the Hopkinton Building & Zoning Department for a **DIMENSIONAL MODIFICATION** in accordance with the provisions of the Hopkinton Zoning Ordinance affecting the following described premises in the manner and on the grounds hereinafter set forth.

NAMES:

Applicant: \_\_\_\_\_ Address: \_\_\_\_\_  
Owner: \_\_\_\_\_ Address: \_\_\_\_\_  
Lessee: \_\_\_\_\_ Address: \_\_\_\_\_

1. Filing Instructions:

- a. The original application and two (2) copies, either typed or legibly printed, must be filed with the Town Building & Zoning Department.
- b. A filing fee in the amount **\$50.00** shall accompany an application to the Building & Zoning Department to cover the costs of processing. In addition to the \$50.00 fee, the applicant shall also be responsible for all costs incurred by the town in the course of review of this application, and will be billed when the final costs have been determined.
- c. All required checklist items for a **DIMENSIONAL MODIFICATION** must accompany the application in order to be considered a complete application.

2. Location of Premises: \_\_\_\_\_  
(Name of Street or Road)

3. Plat(s) \_\_\_\_\_ Lot(s) \_\_\_\_\_ Zoning District(s) \_\_\_\_\_  
911 Address: \_\_\_\_\_

4. Dimensions of Lot: (Frontage) feet by (Depth) feet Area: (Square Ft. or Acres)
5. State present use of premises: \_\_\_\_\_
6. State proposed use of premises: \_\_\_\_\_
7. Is there a building(s) on the premises at present? \_\_\_\_\_
8. How long have you owned the premises? \_\_\_\_\_  
State year which lot(s) were platted and recorded:
9. Have you submitted plans to the Building & Zoning Inspector? \_\_\_\_\_  
Has a permit been refused: \_\_\_\_\_  
If a permit has been refused, attach a copy of the denial, in writing.
10. Please give the size (in feet) of all existing buildings and accessory structures:  
  
\_\_\_\_\_
11. Please give the size (in feet) of all proposed buildings and accessory structures:  
  
\_\_\_\_\_
12. Please describe the extent of the proposed alterations:  
  
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\_\_\_\_\_  
  
\_\_\_\_\_
13. Please indicate the number of families which building is to be arranged: \_\_\_\_\_

14. Indicate the provision or regulation of the Hopkinton Zoning Ordinance under which application for **DIMENSIONAL MODIFICATION** is made:

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15. Clearly state the grounds for which this **DIMENSIONAL MODIFICATION** is sought:

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Respectfully submitted,

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_





**APPENDIX E**  
**APPLICATION & CHECKLIST TO:**  
**TOWN COUNCIL**  
**FOR:**  
**ZONING ORDINANCE AMENDMENT**

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**TOWN COUNCIL****APPLICATION CHECKLIST FOR:****ZONING ORDINANCE AMENDMENT**

The application for a Zoning Ordinance Amendment to the Town Council must be accompanied with the following information:

- A. Three (3) copies of a site prepared by, and signed and stamped by, a professional engineer or professional land surveyor at a scale of no less than one (1) inch = forty (40) feet clearly showing:
- name & address of property owner(s)
  - date, north arrow, graphic scale, lot dimensions and area
  - plat & lot, zoning district(s) and setbacks
  - existing and proposed structures, and their relationship & distances from lot boundary lines
  - existing and proposed parking areas and walkways
  - existing and proposed landscaping, as it relates to the request
  - existing streets, 911 address, wells, septic system
  - list of names and addresses of all property owners within 200 feet of subject property
  - any peculiar site conditions or features
  - topographic data as may be taken from the U.S. Geological Survey 7.5 \* 15 minute series quadrangle maps of the area proposed for zone amendment
- B. Three (3) copies of separate map indicating all property owners within 200 feet of the subject property and/or all those property owners and entities which require notice under Section 45-24-53 R.I.G.L., also depicting any zoning district boundary and uses of all neighboring properties.
- C. A soil erosion and stormwater control plan with supporting calculations based standards approved by the USDA Soil Conservation Service and in conformity with the R.I. Erosion and Sediment Control Handbook.

- D. A letter from a biologist indicating that there are no fresh-water wetlands on or in proximity to the site such that the application is regulated by the R.I. Freshwater Wetlands Act. In those instances where the application is regulated by the R.I. Freshwater Wetlands Act, a physical alteration permit issued by the R.I. Department of Environmental Management, and where applicable, the U.S. Army Corp of Engineers, shall be required.
- E. Location of existing septic system. Where construction requires approval by R.I.DEM - Division of Land Resources for an ISDS (individual sewage disposal system) or change of use permit for the proposed activity, attach a copy to the application.
- F. Traffic Study addressing the potential impacts of the proposed activity.
- G. Provide evidence that the proposed water supply has sufficient supply to support the proposed activity and is of drinking water quality.
- H. Provide statement as to the purpose of the amendment.
- I. Provide statement as to proposed use(s) of the property (from District Use Table).

**TOWN OF HOPKINTON  
TOWN COUNCIL**

To: Hopkinton Town Council  
Town Hall  
1 Town House Road  
Hopkinton, R.I. 02833

Ladies/Gentlemen:

The undersigned hereby applies to the Hopkinton Town Council for a **ZONING ORDINANCE AMENDMENT** in accordance with the provisions of the Hopkinton Zoning Ordinance affecting the following described premises in the manner and on the grounds hereinafter set forth.

NAMES:

Applicant: \_\_\_\_\_ Address: \_\_\_\_\_  
Owner: \_\_\_\_\_ Address: \_\_\_\_\_  
Lessee: \_\_\_\_\_ Address: \_\_\_\_\_

1. Filing Instructions:

- a. The original application and two (2) copies, either typed or legibly printed, must be filed with the Town Clerk.
- b. A filing fee in the amount **\$100.00** shall accompany an application to the Town Council to cover the costs of processing. In addition to the \$100.00 fee, the applicant shall also be responsible for all costs incurred by the town in the course of review of this application, and will be billed when the final costs have been determined.
- c. All required checklist items for a **ZONING ORDINANCE AMENDMENT** must accompany the application in order to be considered a complete application.

2. Location of Premises: \_\_\_\_\_  
(Name of Street or Road)

3. Plat(s) \_\_\_\_\_ Lot(s) \_\_\_\_\_ Zoning District(s) \_\_\_\_\_  
911 Address: \_\_\_\_\_

4. Dimensions of Lot: (Frontage) feet by (Depth) feet Area: (Square Ft. or Acres)

5. State present use of premises: \_\_\_\_\_
6. State proposed uses of premises: \_\_\_\_\_
7. Is there a building(s) on the premises at present? \_\_\_\_\_
8. How long have you owned the premises? \_\_\_\_\_  
State year which lot(s) were platted and recorded: \_\_\_\_\_
9. Have you submitted plans to the Building & Zoning Inspector? \_\_\_\_\_  
Has a permit been refused: \_\_\_\_\_  
If a permit has been refused, attach a copy of the denial, in writing.
10. Please give the size (in feet) of all existing buildings and accessory structures:  
\_\_\_\_\_  
\_\_\_\_\_
11. Please give the size (in feet) of all proposed buildings and accessory structures:  
\_\_\_\_\_  
\_\_\_\_\_
12. Please describe the extent of the proposed alterations:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
13. Please indicate the number of families which building is to be arranged: \_\_\_\_\_
14. Indicate the provision of the Hopkinton Zoning Ordinance under which application for **ZONING ORDINANCE AMENDMENT** is made:  
\_\_\_\_\_  
\_\_\_\_\_

15. Clearly state the grounds for which this **ZONING ORDINANCE AMENDMENT** is sought:

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Respectfully submitted,

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_





**APPENDIX F**  
**APPLICATION & CHECKLIST TO:**  
**ZONING BOARD OF REVIEW**  
**FOR:**  
**APPEAL**

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**ZONING BOARD OF REVIEW**  
**APPLICATION CHECKLIST FOR:**  
**APPEAL**

The application for an Appeal to the Zoning Board of Review must be accompanied with the following information:

- A. Copies of all documents filed with the official or agency from which the appeal is taken.
- B. Copies of all decisions of the official or agency from which the appeal is taken.
- C. The record of any proceeding from which the appeal is taken.
- D. Three (3) copies of a map indicating all property owners within 200 feet of the subject property, and/or all those property owners and entities which require notice under Section 45-24-53 R.I.G.L., also depicting any zoning district boundary.

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**TOWN OF HOPKINTON  
ZONING BOARD OF REVIEW**

To: Hopkinton Zoning Board of Review  
Town Hall  
1 Town House Road  
Hopkinton, R.I. 02833

Ladies/Gentlemen:

The undersigned hereby applies to the Hopkinton Zoning Board of Review for an **APPEAL** in the application of the provisions or regulations of the Hopkinton Zoning Ordinance affecting the following described premises in the manner and on the grounds hereinafter set forth.

**NAMES:**

Applicant: \_\_\_\_\_ Address: \_\_\_\_\_  
Owner: \_\_\_\_\_ Address: \_\_\_\_\_  
Lessee: \_\_\_\_\_ Address: \_\_\_\_\_

**1. Filing Instructions:**

- a. The original application and two (2) copies, either typed or legibly printed, must be filed with the Town Clerk's Office in accordance with the minimum time required to post adequate notice.
- b. A filing fee in the amount **\$75.00** shall accompany an application to the Zoning Board of Review to cover the costs of legal advertisement and processing. In addition to the \$75.00 fee, the applicant shall also be responsible for all costs incurred by the town in the course of review of this application, including stenographic services, and will be billed when the final costs have been determined.
- c. All required checklist items for an **APPEAL** must accompany the application in order to be considered a complete application.

**2. Location of Premises:** \_\_\_\_\_  
(Name of Street or Road)

**3. Plat(s)** \_\_\_\_\_ **Lot(s)** \_\_\_\_\_ **Zoning District(s)** \_\_\_\_\_

911 Address: \_\_\_\_\_

4. Dimensions of Lot: (Frontage) feet by (Depth) feet Area: (Square Ft. or Acres)

5. State present use of premises: \_\_\_\_\_

6. State proposed use of premises: \_\_\_\_\_

7. Is there a building(s) on the premises at present? \_\_\_\_\_

8. How long have you owned the premises? \_\_\_\_\_  
State year which lot(s) were platted and recorded:

9. Have you submitted plans to the Building & Zoning Inspector? \_\_\_\_\_

Has a permit been refused: \_\_\_\_\_

If a permit has been refused, attach a copy of the denial, in writing.

10. Please give the size (in feet) of all existing buildings and accessory structures:

\_\_\_\_\_

11. Please give the size (in feet) of all proposed buildings and accessory structures:

\_\_\_\_\_

12. Please describe the extent of the proposed alterations:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

13. Please indicate the number of families which building is to be arranged: \_\_\_\_\_

14. Indicate the provision or regulation of the Hopkinton Zoning Ordinance under which application for **APPEAL** is made:

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15. Clearly state the grounds for which this **APPEAL** is sought:

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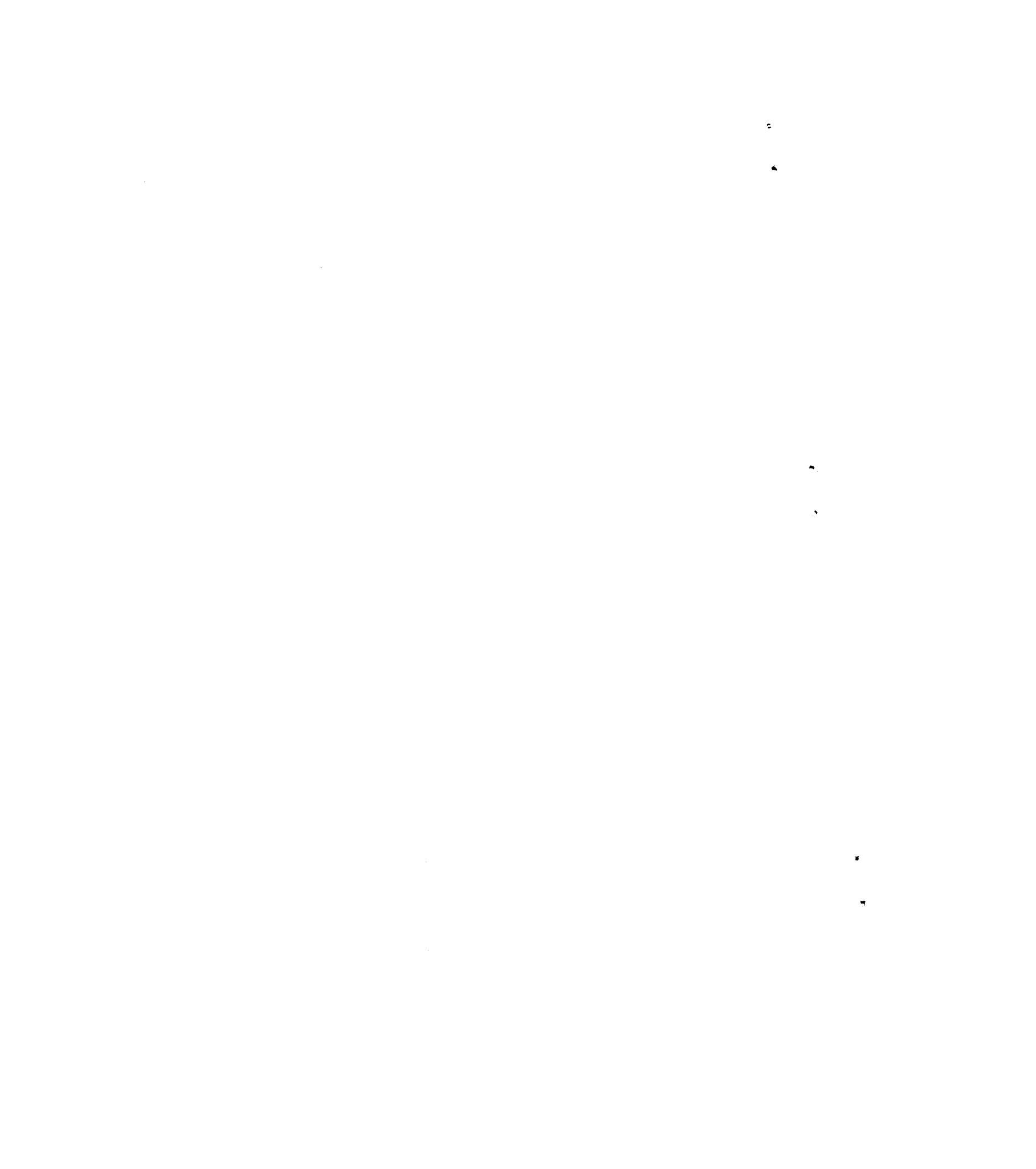
Respectfully submitted,

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_





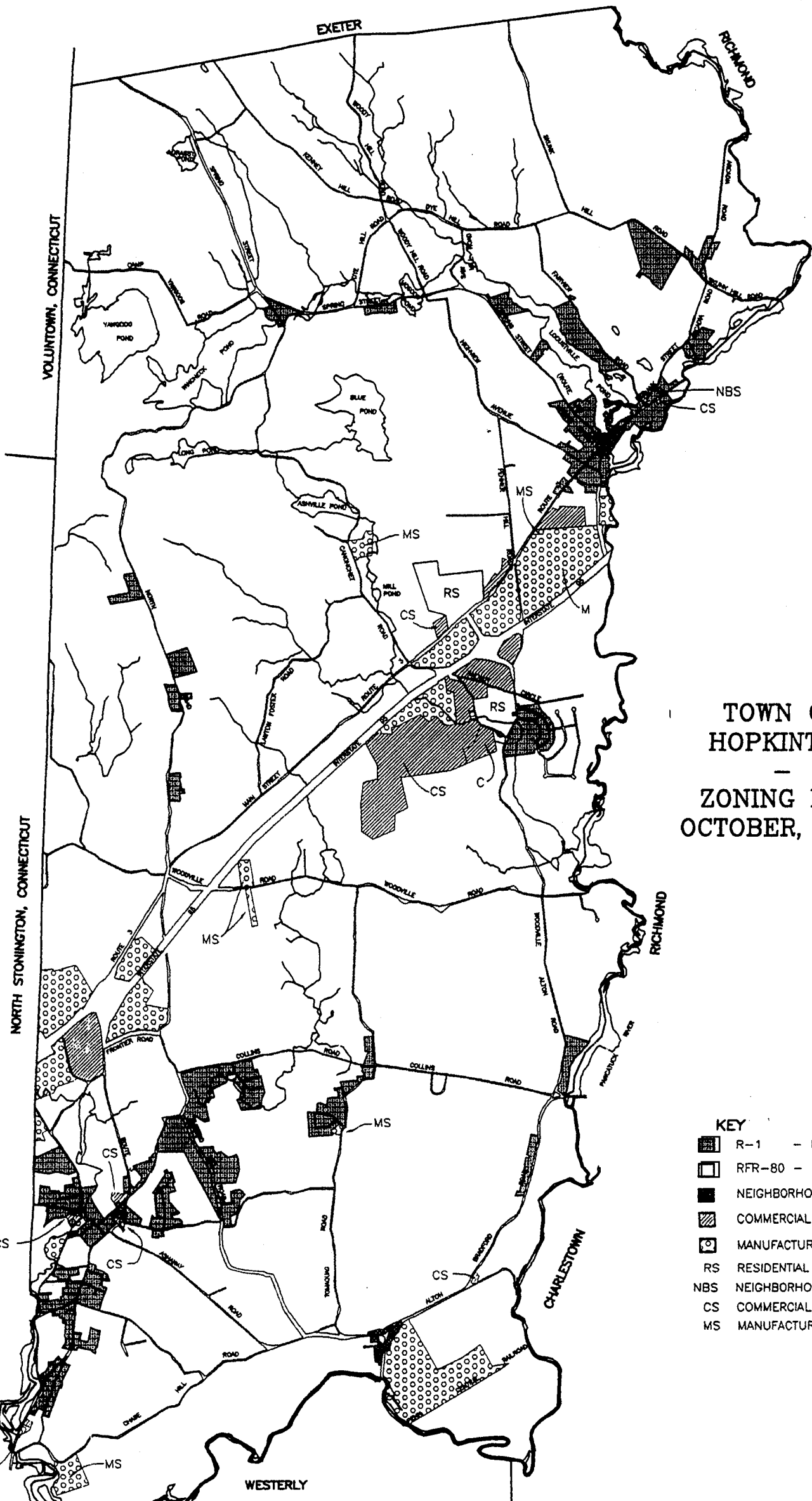
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TOWN OF  
HOPKINTON  
—  
ZONING MAP  
OCTOBER, 1994

- KEY**
- R-1 - RESIDENTIAL
  - RFR-80 - RESIDENTIAL
  - NEIGHBORHOOD BUSINESS
  - COMMERCIAL
  - MANUFACTURING
  - RS RESIDENTIAL SPECIAL
  - NBS NEIGHBORHOOD BUSINESS SPECIAL
  - CS COMMERCIAL SPECIAL
  - MS MANUFACTURING SPECIAL

SCALE: 1" = 4000'

