

TOWN OF BARRINGTON, RI
APPLICATION FOR SUBDIVISION OF LAND &
LAND DEVELOPMENT PROJECTS

Name of Applicant/Developer: _____

Address: _____

Phone #: _____

Property Owner: _____

Address: _____

Phone #: _____

Street Location of Property: _____

Plat: _____ Lot(s): _____ Zoning: _____

Parcel Size: _____ Current Use: _____

Description of proposed subdivision or development, including number of proposed lots and/or units:

Primary Project Contact (Applicant, Architect, Engineer, Attorney)

Name _____

Address: _____

Phone #: _____ Fax: _____ E-Mail: _____

Signature of Applicant

Date

Please see appropriate checklist for submission requirements and current fee schedule for filing fee.