TO: Coastal Resources Management Council  
4804 Tower Hill Road Suite 3  
Wakefield RI, 02879

DATE: April 7, 2014

SUBJECT: Application of: _______________________________

Location: _______________________________

PLAT No. ______________ LOT No. ______________

To Construct: _______________________________

Plans Received for Review

Date of Plans / Last Revision _______________________________

Plans Prepared By: _______________________________

Titled: _______________________________

_________ Foundation Plans Only

_________ Building Plans of Complete Structure

_________ Site Plans

I hereby certify I have reviewed the above submitted documents

_____ And find that issuance of a State of Rhode Island building permit is not required.

_____ And find that issuance of a State of Rhode Island building permit is required. Such permits will only be issued after submission and approval of adequate documentation to verify that all construction related activities requiring permits fully conform to the Rhode Island State Building Code and Fire Code.

_____ And find that a Septic System Suitability Determination (SSD) must be obtained from the Rhode Island Department of Environmental Management

_____ And find that a Septic System Suitability Determination (SSD) need not be obtained from the Rhode Island Department of Environmental Management

Building Official’s Signature ______________ Date: ______________