



**Planning Department**

45 Broad Street, Cumberland, RI 02864  
Phone: (401) 728-2400 x 43 Fax: (401) 724-3311

**APPENDIX B: GENERAL APPLICATION FOR  
SUBDIVISION AND DEVELOPMENT PROJECTS**

Type of Application:

Administrative \_\_\_\_\_ Name of Project: \_\_\_\_\_  
Pre-application \_\_\_\_\_  
Master Plan \_\_\_\_\_ Location of Project: \_\_\_\_\_  
Preliminary Plan \_\_\_\_\_  
Final Plan \_\_\_\_\_ Assessor's Plat(s) and Lot(s): \_\_\_\_\_

Project Classification (Major, Minor, Development Plan Review):

Name, Address, and Telephone Number of Applicant(s):

Applicant's Signature(s):

Date:

Name, Address, and Telephone Number of Owner(s)

I/we certify that I/we am the owner of the property designated above and hereby request to have this application reviewed. The required information detailed in the Land Development and Subdivision Regulations of the Town of Cumberland has been presented to the Administrative Officer.

Owner's Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

*Use additional pages as necessary for other owners.*

Additionally, \_\_\_\_\_ of \_\_\_\_\_  
is hereby designated as the primary person of contact to whom the Planning Department should contact with any questions arising from this application.

Name, Address, Telephone Number, and Fax Number of Attorney, if any:

Name, Address, Telephone Number, and Fax Number of Surveyor/Engineer:

Fee Paid \$ \_\_\_\_\_ Received by: \_\_\_\_\_  
Date: \_\_\_\_\_