



Town of Smithfield

64 FARNUM PIKE
SMITHFIELD, RHODE ISLAND 02917

Building / Zoning Office

Telephone: (401) 233-1039

Fax: (401) 233-1091

APPLICATION FOR ZONING CERTIFICATE

Date of Request: _____

\$20 Fee: CASH -/- CHECK

Address of Requested Property: _____

Anticipated Use: _____

Requesting Party's Name: _____

Requesting Party's Address: _____

Phone: _____ Email: _____ Fax: _____

DO NOT WRITE BELOW THIS LINE...OFFICIAL USE ONLY

ZONING CERTIFICATE

Date of Certificate: _____

Assessor's Plat: _____ Lot: _____

Property Address: _____

Property Owner: _____

Present Use: _____

Presently Zoned: _____ Conformance: _____

Comments: _____

Official's Signature: _____

Official's Name & Title: _____

This zoning determination is made according to the Official's interpretation. Parties can appeal this determination to the Town of Smithfield Zoning Board of Review.