

**TOWN OF WEST GREENWICH  
PLANNING DEPARTMENT  
280 Victory Highway, West Greenwich, RI 02817**

**CERTIFICATE OF COMPLETENESS**

**TYPE OF APPROVAL REQUESTED:**

- |   |  |
|---|--|
| <input type="checkbox"/> Pre-application/Concept Review | <input type="checkbox"/> Development Plan Review |
| <input type="checkbox"/> Master Plan                    | <input type="checkbox"/> Administrative          |
| <input type="checkbox"/> Preliminary Plan               | <input type="checkbox"/> Other                   |
| <input type="checkbox"/> Final Plan                     |  |

Owner (s): \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Site Location: \_\_\_\_\_

Assessor's Plat/Lot: \_\_\_\_\_ Zoning: \_\_\_\_\_ Land Area: \_\_\_\_\_

Name of Contractor, Developer or Builder: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner/Agent Date

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This section to be completed by Administrative Officer

**Type of Project or Subdivision:**

- |   |  |
|---|--|
| <input type="checkbox"/> Administrative     | <input type="checkbox"/> Major: Commercial |
| <input type="checkbox"/> Minor              | <input type="checkbox"/> Other             |
| <input type="checkbox"/> Major: Residential |  |

Application Fee: \$ \_\_\_\_\_ Date Pd.: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Administrative Officer Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Administrative Officer Date Application Deemed Complete