Office of Robert B. Speaker
Town of Barrington Rhode Island
(401) 247-1900

ZONING CERTIFICATE

ACCORDING TO THE RECORDS OF THE BUILDING INSPECTOR

OF THE BELOW LISTED MUNICIPALITY, THE REAL ESTATE IDENTIFIED AS:

LOT(S) _____ ON ASSESSOR'S PLAT _____

IS CURRENTLY ZONED AS _____ ITS CURRENT

USE IS _____ THAT USE IS

_____ 1. PERMITTED UNDER ORDINANCE.

_____ 2. LAWFUL NON-CONFORMING USE.

_____ 3. UNLAWFUL AND NOT PERMITTED.

_____ _____

SIGNATURE MUNICIPAL OFFICER DATE

REAL ESTATE ADDRESS: _____

TO: _____

NAME OF OWNER(S)/BUYER(S)

THIS IS BEING SUPPLIED TO YOU ACCORDING TO SECTION 45-24-54 OF

THE GENERAL LAWS OF RHODE ISLAND AND SECTION 185-39 OF THE

BARRINGTON ZONING ORDINANCE.

ANY MISREPRESENTATION OF A MATERIAL FACT BY THE PERSON REQUESTING THIS CERTIFICATE SHALL VOID THIS CERTIFICATE.

_____ _____

SIGNATURE OF OWNER(S)