

EXHIBIT A-3
(Second Application Form)

**Board of
Water and Sewer Commissioners
TOWN OF JAMESTOWN, RHODE ISLAND 02835**

APPLICATION FOR WATER AND SEWER EXTENSION

COMPLETED BY APPLICANT

DATE: January 2, 2024

Applicant:

Email: jeffs@saletinregroup.com

Name: Jeffrey & Deborah Saletin

Phone: 401-529-9730

Address: 14 Seaview Ave

Jamestown, RI 02835

Zoning District: R-40

Type of Service Extension Being Requested:

Water X Sewer _____

Use: Residential

(single family) X

(multi family) _____

Residential multi family on existing line _____

Commercial _____

Other _____

Location of Extension Request:

Street 14 Seaview Ave.

Plat: 7 Lot: 135

Please give detail description of proposed plan and anticipated annual water consumption:

We request that the town water line be extended to
service our home, which is a 3-bedroom single family home.

The water consumption is 73,000 gallons per annum or

Please attach "sketch" of proposed installations.

200 gallons per day.

(Applicants signature is required on Page 2)

We have an existing well which ran
dry twice this past fall. Our well generates
only 1 1/2 gallons per minute and the water
is of very poor quality. We are unable to treat our water
throughout the year because of the low yield in the well.
John Lemme Well and Pump, Northeast Water Solutions,
and Di Preto Engineering Associates are working on an
issue.

☒ --\$49.00 Recording Fee for Decision Letter. (Fee effective 11/12/07 per RIGL 34-13-7)
This fee is due at the time the application is filed with this office. If the application is not approved by the Board of Water and Sewer Commissioners the fee will be returned to the applicant.

Applicant agrees to take water and sewer service in full compliance with the rules and regulations of the Commission. Applicant agrees to accept all cost associated with the requested service connection. In addition, applicant agrees to pay \$3000. for Water Service extension fee and/or \$3000 for Sewer Service extension fee and any other applicable water or sewer fees. All work according to approved plans and specifications. The Town of Jamestown will inspect all work before final acceptance.

Date: January 2, 2024

Applicants Signature: _____

Owners Signature: _____

Agreement is valid for 1 year from date of approval.

Approval by the Board of Water and Sewer Commissioners:

Commission President

Date _____

ALL NOTE: Regular meetings of the Board of Water and Sewer Commissioner are held once monthly. Meetings are held at the Jamestown Town Hall, Council Chambers, 93 Narragansett Avenue, Jamestown, RI. This meeting location is accessible to the physically challenged. Hearing or speech impaired individuals requiring the services of an interpreter should call 1-800-745-5555 or 423-1212 not less than 3 business days prior to this meeting.

- The following information is requested by the Federal Government in order to monitor our compliance with various civil rights laws. You are not required to furnish this information,

but are encourage to do so. The law requires that we may not discriminate based upon this information, nor whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations we are required to note the race and sex on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below.

I do not wish to furnish this information _____

Race/National Origin: American Indian or Alaskan Native _____

Asian or Pacific Island _____

White, not of Hispanic origin X

Black, not of Hispanic origin _____

Hispanic origin _____

Other (specify) _____

Sex: Female X

Male X

COMPLETED BY PUBLIC WORKS/ENGINEERING DEPARTMENTS

Location proposed Water _____ Sewer _____ Extension _____

Street or Right of Way _____ Urban District _____

Rural District _____

Location of Nearest Main: Water Main _____

Sewer Main _____

Number of Feet Proposed Extension: Water Main _____

Sewer Main _____

Number of lots served by proposed extension: Improved _____

Unimproved _____

Estimated total cost of project: Water Line _____

Sewer Line _____

Estimated total cost per foot: Water Line _____

Sewer Line _____

Would Town Provide:

Manpower: Yes _____ No _____ Equipment: Yes _____ No _____ Materials: Yes _____ No _____

Public Works Director

Comments: _____

Date _____ Signature/Title _____

COMPLETED BY PLANNING DEPARTMENT

Is request consistent with Comprehensive Community Plan?

Please explain _____

Potential for future subdivision? Please explain _____

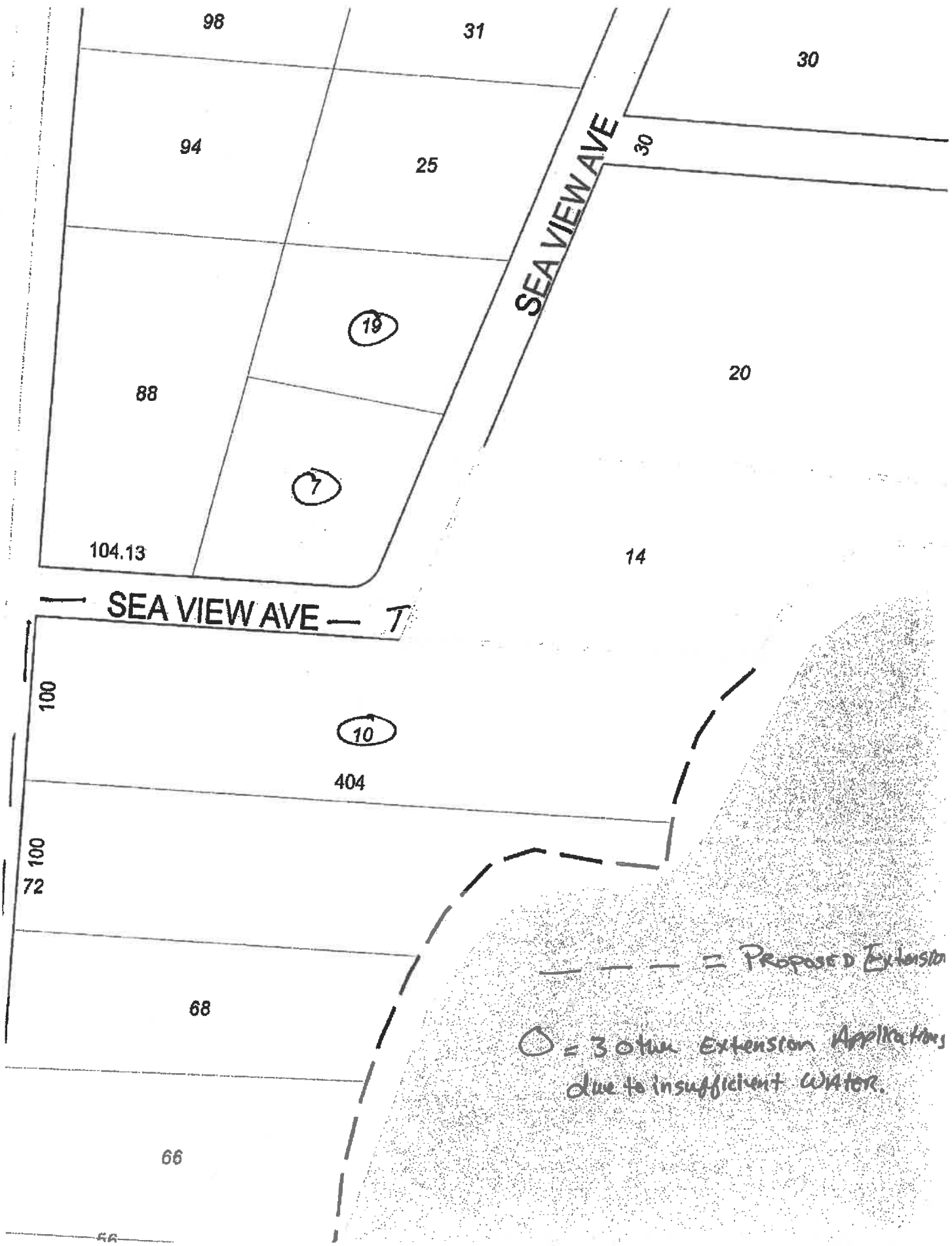
Date _____ **Signature/Title** _____

COMPLETED BY FIRE CHIEF

Request will or will not reduce the level of fire protection of the community? Please explain _____

Fire Hydrants required? Yes _____ No _____

Date _____ Signature/Title _____



SEA VIEW AVE — T

SEA VIEW AVE

— — — = Proposed Extension

○ = 30 day Extension Applications due to insufficient water.

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