



Town of South Kingstown, Rhode Island

BUILDING AND ZONING DEPARTMENT

180 High Street
Wakefield, RI 02879
Tel (401) 789-9331 x1224
Fax (401) 789-9792

DEED RESTRICTION for ACCESSORY FAMILY DWELLING UNIT

Pursuant to R.I. General Law - TITLE 45, Chapter 24 – Rhode Island Zoning Enabling Act
SECTION 45-24-37 (e) – General provisions- Permitted uses.

This DEED RESTRICTION is entered into as of this _____ day of _____ 20____,
by and between _____
of (address) _____
in the TOWN OF SOUTH KINGSTOWN, (herein after referred to as the “GRANTOR(S)”) and the
TOWN OF SOUTH KINGSTOWN, a Rhode Island municipal corporation (the “GRANTEE”).

WHEREAS, the GRANTOR(S) declares that they are the owner(s) of real estate located at (*street*
#) _____ known as Tax Assessor’s Plat
_____ and Lot _____ in the Town of South Kingstown (herein after referred to as the “Premises”);
and,

WHEREAS, on or about (*date*) _____ GRANTOR(S) have
agreed to designate _____ square feet of the existing dwelling unit that exists on Assessor’s
Plat _____, Lot _____ as an accessory family dwelling unit; and,

WHEREAS, the GRANTOR(S) agree to ensure that the accessory family dwelling unit shall satisfy
the following criteria set forth in Rhode Island General Law following provisions § 45-27-37 (e):

Notwithstanding any other provision of this chapter, an accessory family dwelling unit in an owner-occupied, single-family residence shall be permitted as a reasonable accommodation for family members with disabilities or who are sixty-two (62) years of age or older. The appearance of the structure shall remain that of a single-family residence and there shall be an internal means of egress between the principal unit and the accessory family dwelling unit. If possible, no additional exterior entrances should be added. Where additional entrance is required, placement should generally be in the rear or side of the structure. When the structure is serviced by an individual, sewage-disposal system, the applicant shall have the existing or any new system approved by the department of environmental management. The zoning-enforcement officer shall require that a declaration of the accessory family dwelling unit for the family member, or members, and its restrictions be recorded in the land-evidence records and filed with the zoning-enforcement officer and the building official. Once the family member, or members, with disabilities or who are sixty-two (62) years of age or older, no longer reside(s) in the premises on a permanent basis, or the title is transferred, the property owner shall notify the zoning official in writing, and the accessory family-dwelling unit shall no longer be permitted, unless there is a subsequent, valid application.

NOW THEREFORE, upon execution of this document by the GRANTOR(S) and GRANTEE, (1) the GRANTOR(S) shall cause such Deed Restriction to be recorded and filed in the Land Evidence Records for the Town of South Kingstown; (2) all requirements and restrictions acknowledged herein shall be covenants running with the property and shall be binding upon the GRANTOR(S) and its successor's and assigns; (3) said requirements and restrictions shall be enforceable by the Town of South Kingstown; and (4) that the Town of South Kingstown shall have the right to bring any action, in law or equity, necessary to enforce said restrictions.

IN WITNESS WHEREOF, the parties hereto each have caused this Deed Restriction to be duly executed and delivered as of the day and year set forth above. For Premises located at Tax Assessor's Plat _____ and Lot _____.

For the GRANTOR(S)

{signature of Grantor (s)}

STATE OF RHODE ISLAND

COUNTY OF _____

In _____, in said County, on this ____ day of _____, 20____,
before me personally appeared _____ to me known and
known by me to be the party executing the foregoing instrument and acknowledged said instrument, as
executed, to be a free act and deed.

Notary Public

My Commission Expires:

For the GRANTEE

Town of South Kingstown Authorized Representative

By: Wayne Pimental

Title: Building & Zoning Official,

Town of South Kingstown

STATE OF RHODE ISLAND

COUNTY OF _____

In _____, in said County, on this ____ day of _____, 20____,
before me personally appeared _____ to me known and
known by me to be the party executing the foregoing instrument and acknowledged said instrument, as
executed, to be a free act and deed.

Notary Public

My Commission Expires: