

RESOLUTION OF THE CITY COUNCIL

No. 549

Approved September 9, 1994

RECEIVED
CITY CLERK
SEP 11 1994

RESOLVED, That the City Collector is hereby authorized to cause the taxes to be abated on that property located along 54 Appleton Street in the total amount of Four Thousand, Twenty-Seven Dollars, Sixty Cents (\$4,027.60) in accordance with the request of the Olneyville Housing Corporation.

IN CITY COUNCIL
SEP 11 1994
READ AND PASSED
James A. Rosinelli
PRES.
Juan M. Angelone
CLERK

APPROVED
SEP - 9 1994
Robert A. Cressi
MAYOR

JURISDICTION

DECISION BY CASE

IN CITY COUNCIL

NOV 4 1994

FIRST READING

REFERRED TO COMMITTEE ON

FINANCE

Michael L. Christ CLERK

THE COMMITTEE ON

FINANCE

Approves Passage of

The Within Resolution

Clarence B. Steward
Chairman
Aug 29 1994

Councilwoman Dr. Kezzo (By request)

CAROLYN F. BRASSIL
CITY COLLECTOR



VINCENT A. CIANCI, JR.
MAYOR

FINANCE DEPARTMENT
CITY COLLECTOR

August 24, 1994

Mr. Michael Clement
City Clerk
City Clerk's Office
City Hall

Dear Mr. Clement:

I am requesting that a S.W.A.P. application filed by Olneyville Housing Corporation for abatement of taxes on Plat 62 Lot 356, be granted. The property is located at 54 Appleton Street; the abatement requested is in the amount of \$4,027.60.

Sincerely,

A handwritten signature in cursive script that reads "Carolyn F. Brassil".

Carolyn F. Brassil
City Collector

CFB/d1

APPLICATION FOR TAX ABATEMENT

Pursuant to Section 21-131 of the Providence Code of Ordinances of the City of Providence, the categories of property which qualify for abatement shall be abandoned buildings with back taxes owing that are required by qualifying homesteaders
Building address:

Assessor's Office Plat No. 62 Lot No. 356

Present Owner: OLNEYVILLE HOUSING CORPORATION

Owners for Previous Three Years:

Year	Owner	Account No.
1993	OLNEYVILLE HOUSING CORPORATION	90025626
1992	OLNEYVILLE HOUSING CORPORATION	"
1991	COLUMBIAN CREDIT UNION	

Date of Purchase by present owner: May 5, 1992

Is building vacant? yes no

If yes, has the building been vacant for over 90 days yes no

Is the building boarded? yes no

If no, is it scheduled to be boarded? yes no

Have all building permits been applied for and complied with?
 yes no

Is the building in compliance with the Providence Minimum Housing Standards? yes no Building under construction

Is there clear title to the property, but for municipal liens?
 yes no

Will there be occupancy by owner for at least one year? yes no

Other Comments:

We, the Olneyville Housing Corp.--a non-profit housing developer--purchased this property for the purpose of rehabilitating it for re-sale to a low income owner-occupant family, thus returning this vacant house to the tax rolls. We have a qualified buyer, ready to move in the moment construction is completed however, the purchase price would be affordable for this family if tax abatement from past tax liability was forthcoming.

NOTE: No application will be considered unless accompanied by the following documentation:

1. Sworn Affidavit of occupancy by owner for at least one year
2. Certification of building inspector that building permits have been applied for and complied with.
3. Certification form the division of minimum housing that the property is in compliance with the Providence Minimum Housing Standards.
4. A certificate of clear title, but for municipal liens.

I hereby state that the within information provided on said application is true and accurate.

David A. Kent

STATE OF RHODE ISLAND
PROVIDENCE, SC.

Alice Engstrom Hammond
Notary Public
Expires 7/17/95

Subscribed and sworn to before me on this 19 day of January 1994

PLEASE PRINT—APPLICANT TO COMPLETE ALL ITEMS

MUNICIPALITY Prov. APPLICATION DATE 11-24-93 CENSUS TRACT _____ FEE RECEIVED: \$ 676.⁹⁶ BY JRC

1. STREET LOCATION 54 Appleton st. 2. ZONING DISTRICT R-4

3. PLAT/MAP 02 4. LOT/BLOCK 356 5. FILE/PARCEL _____ 6. AREA 2.025 @ 7. FIRE DISTRICT NO. (0 or 1) 2

8. USE OF STRUCTURE: PREVIOUS (3) Fam. Dwelling PROPOSED (2) Fam. Dwelling

9. OWNER Olneyville Housing Corp ADDRESS _____ TEL NO. _____

10. CONTRACTOR (0 or 1*) Mago Co. ADDRESS _____ TEL NO. 453-6410

11. CONTRACTOR ADDRESS _____ 12. RI BUILDERS REGISTRATION NO. 6453

13. ARCH. OR ENG. Urban Design Group ADDRESS _____ TEL NO. _____

14. RHODE ISLAND REG. NO. 808 15. Stamped Prints (Circle one) Yes No 16. Certificate of Occupancy Required Yes No

17. DESCRIPTION OF WORK TO BE PERFORMED General Extension and Interior Renovations to convert from (3) to (2) Fam. Dwelling. 18. USE OF EACH FLOOR

BSMT. <u>storage</u>
1st. <u>one fam.</u>
2nd <u>one fam.</u>
3rd <u>Rms for 2nd. Floor</u>
Other _____

TYPE AND COST OF BUILDING—PLEASE CHECK APPROPRIATE ITEMS AND ENTER REQUESTED DATA

A. TYPE OF IMPROVEMENT 1. _____ NEW STRUCTURE 2. _____ ADDITION TO STRUCTURE 3. _____ INSTALLATION 4. <input checked="" type="checkbox"/> RECONSTRUCTION 5. _____ REPLACEMENT 6. _____ FOUNDATION ONLY	B. OWNERSHIP PUBLIC 1. _____ STATE 2. _____ CITY OR TOWN 3. _____ OTHER, SPECIFY _____ PRIVATE 4. <input checked="" type="checkbox"/> TAXABLE 5. _____ TAX EXEMPT	C. PRINCIPAL TYPE OF CONSTRUCTION (CONSTRUCTION CLASS (Check one)) 1. 1A _____ 5. 2C _____ 9. 5A _____ 2. 1B _____ 6. 3A _____ 10. 5B <input checked="" type="checkbox"/> 3. 2A _____ 7. 3B _____ 4. 2B _____ 8. 4 _____
D. PROPOSED USE RESIDENTIAL 1. _____ R-1 MOTEL, HOTEL 2. _____ R-2 MULTI-FAMILY 3. _____ R-3 One and Two Family Attached 4. <input checked="" type="checkbox"/> R-4 One and Two Family Detached 5. _____ GARAGE 6. _____ CARPORT 7. _____ MOBILE HOME 8. _____ SWIMMING POOL 9. _____ FENCES 10. _____ SIGNS 11. _____ FIREPLACE 12. _____ OTHER, SPECIFY _____	E. PROPOSED USE NON-RESIDENTIAL 1. _____ A-1-A THEATRES W/STAGE 2. _____ A-1-B THEATRES W/O STAGE 3. _____ A-2 NIGHT CLUBS 4. _____ A-3 RESTAURANTS 5. _____ A-4 CHURCHES 6. _____ A-5 STADIUMS 7. _____ B BUSINESS 8. _____ E EDUCATIONAL 9. _____ F-1 FACTORY (MOD. HAZ.) 10. _____ F-2 FACTORY (LOW HAZ.) 11. _____ H HIGH HAZARD 12. _____ I-1 INSTITUTIONAL GROUP HOME 13. _____ I-2 INSTITUTIONAL INCAPACITATED 14. _____ I-3 INSTITUTIONAL RESTRAINED 15. _____ M MERCANTILE 16. _____ S-1 STORAGE MODERATE 17. _____ S-2 STORAGE LOW 18. _____ SWIMMING POOL 19. _____ FENCES 20. _____ SIGNS 21. _____ OTHER SPECIFY _____	F. RESIDENTIAL (COMPLETE FOR NEW BUILDINGS, AND RECONSTRUCTION) 1. <u>2</u> SINGLE FAMILY TOTAL SINGLE FAMILY UNITS 2. _____ TOTAL NO. OF BEDROOMS TOTAL NO. OF BATHROOMS 3. _____ Full 4. _____ Half MULTI-FAMILY 5. _____ TOTAL NO. OF KITCHENS TOTAL NO. OF BATHROOMS 6. _____ Full 7. _____ Half TOTAL NO. OF APARTMENTS BY NO. OF BEDROOMS 8. Effic. _____ 9. 1 _____ 10. 2 _____ 11. 3 _____ 12. 4 _____ 13. 5 _____ 14. _____ MORE, Please Specify _____ 15. _____ TOTAL NUMBER OF BUILDINGS IN PROJECT.
G. FOUNDATION SETS BACK FROM PROPERTY LINES 1. FRONT _____ ft., _____ in. 2. REAR _____ ft., _____ in. 3. LEFT SIDE _____ ft., _____ in. 4. RIGHT SIDE _____ ft., _____ in.	H. DIMENSIONS 1. No. of Stories <u>3</u> 2. Basement: Yes <input checked="" type="checkbox"/> No _____ 3. Height of Construction Ft. _____ MAX. WIDTH _____ MAX. DEPTH _____ 4. Total Floor Area Sq. Ft. w/o Basement _____	I. ESTIMATED COST MATERIAL AND LABOR 1. GENERAL <u>\$ 60,000.⁰⁰</u> TO BE INSTALLED BUT NOT INCLUDED IN THE ABOVE COST 2. ELECTRICAL \$ _____ 3. PLUMBING OR PIPING \$ _____ 4. HEATING, AIR COND. \$ _____ 5. OTHER, ELEVATOR, ETC. \$ _____ TOTAL COST \$ _____
J. FLOOD HAZARD AREA - 1. YES 2. NO <input checked="" type="checkbox"/> 1. Elev. (MSL) of lowest floor incl. basement _____ 2. Elev. (MSL) of 100 year flood _____	K. TYPES OF SEWAGE DISPOSAL 1. <input checked="" type="checkbox"/> PUBLIC 2. _____ PRIVATE SYSTEM* 3. ISDS NO. _____ DATE _____	O. FEES 1. MUNICIPAL BUILDING PERMIT FEE = \$ <u>530.⁰⁰</u> 2. CE & ADA FEE: _____ + _____ x .001 = \$ <u>60.⁰⁰</u> (I) ITEM #1 + ITEM #5 x .001 = \$ <u>36.⁹⁶</u> TOTAL PERMIT FEE <u>\$ 626.⁹⁶</u> (1 & 2 FAMILY DWELLING LIMITED) (TO CE & ADA FEE OF \$50.00) <u>50.⁰⁰</u> <u>676.⁹⁶</u>
L. NUMBER OF OFF-STREET PARKING SPACES 1. ENCLOSED _____ 2. OUTDOORS _____	M. TYPE OF WATER SUPPLY 1. <input checked="" type="checkbox"/> PUBLIC 2. _____ PRIVATE SYSTEM 3. _____ INDIVIDUAL, WELL	N. EQUIPMENT* 1. INCINERATOR _____ 2. ELEVATOR (Enter Number) _____

I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the owner of this building and the undersigned agree to conform to all applicable codes and ordinances of this jurisdiction.

*IN-STATE CONTRACTOR - 0 OUT-OF-STATE CONTRACTOR - 1 TEL. NO. _____ APPLICANT'S SIGNATURE _____

*STATE APPROVAL REQUIRED. SEE BACK OF FORM FOR INFORMATION.

FOR Olneyville Housing 83879.02

RECEIVER'S DEED

COLUMBIAN CREDIT UNION, by Maurice C. Paradis, Receiver of the Estate of Columbian Credit Union by the power conferred by the Superior Court for Providence County, Providence, Rhode Island by Decree entered October 8, 1991 and recorded with the Westerly Records of Land Evidence in Book 381, Pages 170-200, the Providence Records of Land Evidence in Book 2475, Pages 287-319, the Warwick Records of Land Evidence in Book 1688, Pages 63-93, and the Newport Records of Land Evidence in Book 523, Pages 73-103, and by every other power me thereunto enabling for Four Thousand Three Hundred Dollars (\$4,300.00) grant to Olneyville Housing Corporation, of Providence, Rhode Island.

See Exhibit "A" attached hereto and made apart hereof.

SUBJECT TO any and all covenants, conditions, restrictions, easements, rights of way, terms and rights of record.

By execution hereof, the undersigned Receiver hereby certifies that all provisions of the above-referenced Decree have been satisfied, to wit:

- (a) The sale price of the property conveyed herein (the "Property") does not exceed \$300,000;
- (b) The sale of the Property is supported by an appraisal performed within the preceeding 12 months, or in the case of an appraisal that is more than 120 days old, by an appraisal update; and
- (c) The sale price of the Property is not less than 85% of the appraised fair value, or, if any appraisal update has been performed, not less than 85% of the most recent appraisal update.

The foregoing certification may be relied upon by the grantee, as well as that grantee's successors and assigns as conclusive evidence of compliance by the Receiver with the requirements of the foregoing Decree with respect to the within sale and conveyance of the Property.

No stamps required

Columbian Credit Union does hereby covenant that it is a resident of the State of Rhode Island as defined by statute and as such is in compliance with RIGL 44-30-71.3

WITNESS its hand this 24th day of February, 1992.

COLUMBIAN CREDIT UNION

BY: Maurice C. Paradis
Maurice C. Paradis
Receiver

STATE OF RHODE ISLAND
COUNTY OF PROVIDENCE

In Providence on the 24th day of FEBRUARY, 1992, before me personally appeared MAURICE C. PARADIS to me known and known by me to be the party executing the foregoing instrument, and he acknowledged said instrument by him executed to be his free act and deed in his said capacity as Receiver of the COLUMBIAN CREDIT UNION and the free act and deed of the COLUMBIAN CREDIT UNION.

John S. Costantino
NOTARY PUBLIC: John S. Costantino
Commission Expires 9/24/92

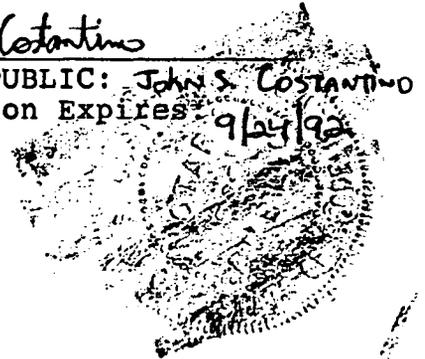


EXHIBIT "A"

That certain lot or parcel of land, with the buildings and improvements thereon, situated on the northerly side of Appleton Street in the City of Providence, County of Providence and State of Rhode Island, laid out and designated as Lot No. Twenty-Five (25) on a plat of house lots belonging to Abiel Sampson and Jonathan Angell, surveyed and platted by Cushing and Farnum, May, 1851, a copy of which plat is recorded in said City of Providence on Plat Card 356. Said lot fronts on Appleton Street thirty-five (35) feet, more or less, and extends back on Benton Street seventy-five (75) feet, more or less.

Subject to rights of others in and to the sewer drain serving the premises.

54 Appleton Street
Providence, Rhode Island

Received for Record at 8 o'clock 51 min. 17 p.
MAY 5 1992 Robert L. Ricci Recorder of Deeds

25547104-106

C

10946

RECEIVED FOR RECORD
at 8 o'clock 57 minutes of
and recorded in book _____ page _____
of record of _____

MAY 15 1982

PROVIDENCE, RI
Witness: Robert Z. Ricci
Fee _____ Recorder of Deeds

Chicago Title Insurance
Co.
155 So. MAIN ST.
Providence, RI 02903

ATTN: Mark Games

AMERICAN LAND TITLE ASSOCIATION
OWNER'S POLICY
(4-6-90)

CHICAGO TITLE INSURANCE COMPANY

SUBJECT TO THE EXCLUSIONS FROM COVERAGE, THE EXCEPTIONS FROM COVERAGE CONTAINED IN SCHEDULE B AND THE CONDITIONS AND STIPULATIONS, CHICAGO TITLE INSURANCE COMPANY, a Missouri corporation, herein called the Company, insures, as of Date of Policy shown in Schedule A, against loss or damage, not exceeding the Amount of Insurance stated in Schedule A, sustained or incurred by the insured by reason of:

1. Title to the estate or interest described in Schedule A being vested other than as stated therein;
2. Any defect in or lien or encumbrance on the title;
3. Unmarketability of the title;
4. Lack of a right of access to and from the land.

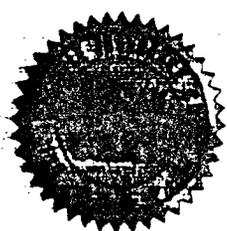
The Company will also pay the costs, attorneys' fees and expenses incurred in defense of the title, as insured, but only to the extent provided in the Conditions and Stipulations.

In Witness Whereof, CHICAGO TITLE INSURANCE COMPANY has caused this policy to be signed and sealed as of Date of Policy shown in Schedule A, the policy to become valid when countersigned by an authorized signatory.

Issued by:
CHICAGO TITLE INSURANCE COMPANY
155 South Main Street
Providence, Rhode Island 02903
(401) 331-4601
Rhode Island Toll Free 1-800-668-2842

CHICAGO TITLE INSURANCE COMPANY
By:

Richard L. Pella
President



By:
Thomas J. Adams
Secretary

**OWNER'S POLICY
SCHEDULE A**

Order No: 926190076

Policy No: 926190076

Amount of Insurance: \$4,300.00

Date of Policy: May 5, 1992

at 8:51 AM

1. Name of Insured:
Olneyville Housing Corporation

2. The estate or interest in the land described herein and which is covered by this policy is:
Fee Simple

3. Title to the estate or interest in the land is vested in the Insured.

4. The land herein described is encumbered by the following mortgage and assignments.
NONE

5.

The land referred to in this Policy is located at 54 Appleton Street, in the City of Providence, County of Providence, State of Rhode Island and is designated as assessors Plat 62, Lot 356 and as more particularly described as follows:

That certain lot or parcel of land, with all the buildings and improvements thereon, situated on northerly side of Appleton Street in

See Attached Exhibit



CITY COLLECTOR

COUNTER BILL

DATE: JAN 20 1994

OLNEYVILLE HOUSING CORPORATION

54 APPLETON ST
PROVIDENCE, RI 02909

ORIG TAX: 4,027.60 CREDITS: 0.00

062-0356-0000 54 APPLETON

REAL ESTATE

ACCOUNT #: 90025626

QTR 1 4,027.60
QTR 2 0.00
QTR 3 0.00
QTR 4 0.00
TOTAL 4,027.60

INTEREST _____

TOT PAID _____

COLLECTOR'S STUB: WHEN PAYING BY MAIL DETACH AND RETURN IN ENVELOPE. MAKE CHECK PAYABLE TO CITY COLLECTOR



CITY COLLECTOR, CITY OF PROVIDENCE

DATE: JAN 20 1994

ACCOUNT #: 90025626

OLNEYVILLE HOUSING CORPORATION

54 APPLETON ST
PROVIDENCE, RI 02909

ORIG TAX: 4,027.60 CREDITS: 0.00

062-0356-0000 54 APPLETON

QTR 1 4,027.60
QTR 2 0.00
QTR 3 0.00
QTR 4 0.00
TOTAL 4,027.60

YR	ACCT NBR	PROP VALUE	TOTAL TAX DUE	CREDITS	TOTAL TAX BAL
93	90025626	71,500	1,309.20	0.00	1,309.20
92	90023013	71,500	1,309.20	0.00	1,309.20
91	90001090	71,500	1,409.20	0.00	1,409.20
			=====	=====	=====
			4,027.60	0.00	4,027.60

NOTE: NO INTEREST IS SHOWN ON THIS STATEMENT. INTEREST WILL BE APPLIED TO ALL PAST DUE BALANCES AT TIME PAYMENT IS MADE.

TAX _____ INTEREST _____ CHARGES _____