



Property Information Request Information Update Information

File#:	BS-X01693-7455340502	Requested Date:	07/17/2024	Update Requested:
Owner:	RAUGHT, THOMAS L ETUX FRANCES A	Branch:		Requested By:
Address 1:	19 JONQUIL DR	Date Completed:		Update Completed:
Address 2:		# of Jurisdiction(s):		
City, State Zip:	EAST GREENWICH, RI	# of Parcel(s):	1	

Notes

CODE VIOLATIONS Per City of Warwick Department of Zoning there are no Code Violation cases on this property.

Collector: City of Warwick
Payable Address: 3275 Post Road, Warwick, RI 02886
Business# (401) 921-9561

PERMITS Per City of Warwick Building Department there are no Open/Pending/ Expired Permit on this property.

Collector: City of Warwick
Payable Address: 3275 Post Road, Warwick, RI 02886
Business# (401) 921-9561

SPECIAL ASSESSMENTS Per City of Warwick Department of Finance there are no Special Assessments/liens on the property.

Collector: City of Warwick
Payable Address: 3275 Post Road, Warwick, RI 02886
Business# (401) 921-9561

DEMOLITION NO

UTILITIES Water
Account #: 11103060600
Payment Status: DELINQUENT
Status: Pvt & Lienable
Amount: \$50.40
Good Thru: 09/14/2024
Account Active: Yes
Collector: Warwick City
Payable: 3275 Post Road, Warwick, RI 0288
Business # (401) 738-2008 EXT 5

UNABLE TO PROVIDE DOCUMENTATION TO THIRD PARTIES. VERBAL INFO ACQUIRED.

Sewer:
The house is on a community sewer. All houses go to the shared septic system.

Garbage:
Garbage bills are included in the Real Estate Property taxes.

19 JONQUIL DR

Location 19 JONQUIL DR

Parcel ID 213/ 0160/ 0000/ /

Account # 118120060

Owner RAUGHT, THOMAS L ETUX
FRANCES A

Assessment \$321,200

Internal PID 10147

Building Count 1

Current Value

Assessment	
Valuation Year	Total
2024	\$321,200

Parcel Addresses

Additional Addresses
No Additional Addresses available for this parcel

Owner of Record

Owner RAUGHT, THOMAS L ETUX FRANCES A

Sale Price \$0

Co-Owner

Book & Page TITLECARD/0

Care Of

Sale Date 09/21/1976

Address 19 JONQUIL DR
EAST GREENWICH, RI 02818

Instrument TC

Qualified U

Ownership History

Ownership History				
Owner	Sale Price	Book & Page	Instrument	Sale Date
RAUGHT, THOMAS L ETUX FRANCES A	\$0	TITLECARD/0	TC	09/21/1976
DAVIS, ROBERT F ETUX LILLIAN M	\$0	0454/1020	TC	06/28/1974
WISHART, CARLTON L ETUX FRANCES X	\$0	0419/0205	TC	09/27/1971
VIERA, FRANCIS A ETUX ANNA M	\$0	0367/0812	TC	03/09/1966
MARTEL HOMES INC	\$0	0340/0223	TC	09/27/1963
CHAMPLIN LUMBER CO	\$0	0331/0441	TC	10/25/1962
CLARK CONSTRUCTION COMPANY	\$0	0323/0219	TC	11/09/1961
CLARK, JACK W ETUX GENEVIEVE M	\$0	0312/0528	TC	09/02/1960

Building Information

Building 1 : Section 1

Year Built: 1963
Living Area: 1,144
Replacement Cost: \$251,353
Building Percent Good: 85
Replacement Cost Less Depreciation: \$213,700

Building Attributes

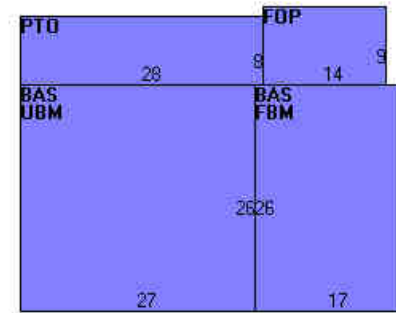
Field	Description
Style:	Ranch
Model	Residential
Grade:	Average
Stories:	1
Occupancy:	1
Exterior Wall 1:	Vinyl Siding
Ext Condition	
Roof Structure:	Gable
Roof Cover:	Asphalt Shingl
Interior Wall 1:	Drywall
Int vs Ext Cond	
1st FL En Suite	Carpet
Floor Rating	
Heat Fuel:	Gas
Heat Type:	Forced Air
AC Type:	Central
Total Bedrooms	3 Bedrooms
Total Full Baths	1
Total Half Baths	0
Total Xtra Fixtrs:	0
Total Rooms	5
Bath Style:	Average
Kitchen Style:	Average
Num Kitchens	
Fireplaces	1
Extra Openings	0
Gas Fireplaces	0
Bsmt Finish	
Bsmt Finish Quality	

Building Photo



(<https://images.vgsi.com/photos/WarwickRIPhotos/\00\05\20\74.JPG>)

Building Layout



(https://images.vgsi.com/photos/WarwickRIPhotos//Sketches/10147_10147)

Building Sub-Areas (sq ft)			Legend	
Code	Description	Gross Area	Living Area	
BAS	First Floor	1,144	1,144	
FBM	Finished Basement	442	0	
FOP	Open Porch	126	0	
PTO	Patio	224	0	
UBM	Basement	702	0	
		2,638	1,144	

Num Park	
Bsmt Garages	2
Bedrooms in LL	
Generator Con.	N
Solar Panels	N
In Law Apt	No
Fndtn Cndtn	
Basement	
Usrflid 706	

Extra Features

Extra Features	<u>Legend</u>
No Data for Extra Features	

Parcel Information

Use Code 101
Description Single Family
Deeded Acres 0.17

Land

Land Use

Use Code 101
Description Single Family
Neighborhood 310

Land Line Valuation

Size (Acres) 0.17
Assessed Value \$106,300

Outbuildings

Outbuildings						<u>Legend</u>
Code	Description	Sub Code	Sub Description	Size	Assessed Value	Bldg #
SHD1	Shed-Avg			160.00 SF	\$1,000	1
WDK	Wood Deck			24.00 SF	\$200	1

Valuation History

Assessment	
Valuation Year	Total
2024	\$321,200
2023	\$321,200
2022	\$247,600



CITY OF WARWICK
OFFICE OF THE CITY CLERK
3275 POST ROAD
WARWICK, RHODE ISLAND 02886
TEL. (401) 738-2006
FAX (401) 732-7640

FRANK J. PICOZZI
MAYOR
Lynn D'Abrosca
CITY CLERK

To Whom It May Concern:

I am responding to you regarding your access to public records request from August 5, 2024 for information from the City of Warwick.

Request:
See Attached

Response:
Property Maintenance – No responsive documents exist.
Fire Department – No responsive documents exist.
Building Department – See Attached

In accordance with RIGL § 38-2 Access to Public Records, this response is the City's complete reply to your request for public records.

In accordance with RIGL § 38-2-8, you may wish to appeal this decision to Mayor Frank J. Picozzi (3275 Post Road, Warwick, RI 02886). You may also wish to file a complaint with the Department of the Attorney General (150 South Main Street, Providence, RI 02903) or the Rhode Island Superior Court of the county where the record(s) are maintained. It is also my understanding that additional information concerning the Access to Public Records Act may be available through the Attorney General's website at www.riag.ri.gov.

Thank you for your interest in keeping government open and accountable to the public.

Sincerely,
/s/Lynn D'Abrosca
Lynn D'Abrosca, City Clerk

Office File

STATE OF RHODE ISLAND
PLUMBING PERMIT APPLICATION

Office File

MUNICIPALITY WARWICK ISSUED 04/01/2015 NUMERICAL CODE 35 PERMIT NO. P15-088
APPLICATION DATE 04/01/2015 CENSUS TRACT _____ FEE RECEIVED: \$ 41.00 BY _____

1. STREET LOCATION 19 JONQUIL DR New or Old Bldg. _____
2.No. of Stories _____
3.4.5. PARCEL ID 213-0160-0000 6. PRIVATE SEWAGE: ISDS NO. _____ DATE / /
7. USE OF STRUCTURE: PREVIOUS SINGLE FAMILY PROPOSED SINGLE FAMILY HOME
8. OWNER RAUGHT, THOMAS L, RAUGHT, FRANCES A, 19 JONQUIL DR, WARWICK RI 02818 TEL NO. _____
9. MASTER PLUMBER JOSEPH FEULA, 7 LAKEWOOD DRIVE JOHNSTON, RI 02919 TEL NO. 231-1174
10. ARCH. OR ENG. _____ ADDRESS _____ TEL NO. _____
11. STAMPED PRINT (Circle one) YES NO 12. RHODE ISLAND REG. NO. _____ 13. MASTER PLUMBER LIC. NO. MP1621
14. DESCRIPTION OF WORK TO BE PERFORMED REPLACE WATER HEATER
15. ESTIMATED COST: \$ 700.00

MUNICIPAL PLUMBING PERMIT FEE: _____ = \$ 40.00
CE/ ADA FEE: 700.00 x .001 = \$ 1.00
ESTIMATED COST x .001 = \$ _____
(1 & 2 FAMILY DWELLING LIMITED TO CE & ADA FEE OF \$ 50.00) TOTAL PERMIT FEE= \$ 41.00

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 the State and this jurisdiction.

MASTER PLUMBER'S SIGNATURE

	WATER CLOSET	SINKS	LAV. SINKS	BATH TUB	SHOWER STALL	HOT WATER HEATER	TEMP PRESS VALVE W/AC BREAKER	WASH TUB	SLOP SINK	URINAL	FLOOR DRAIN	DISH WASHER	DRINKING FOUNT.	AUTO. WASHER	STACKS	HOSE BIBBS	ANTI-SIPHON DEVICES	INDIRECT WASTES	BACKFLOW PREVENTERS	PRESSURE BOILER	YARD OR AREA DRAINS	CONNECT TO SEWER	OTHER
BASEMENT																							
1ST STORY																							
2ND STORY																							
3RD STORY																							
4TH STORY																							
5TH STORY																							
6TH STORY																							
7TH STORY																							
8TH STORY																							
9TH STORY																							
10TH STORY																							
TOTALS																							
TRAP TYPE																							
PIPE MAT'L																							
VENT TO ROOF																							

DO NOT WRITE BELOW THIS LINE PLUMBING PERMIT

Inspections:
Rough _____ PERMIT GRANTED: _____
_____ DATE _____
FINAL _____
Disapproved* _____ BY _____
PLUMBING INSPECTOR

*For the following reasons _____

CERTIFICATE OF INSPECTION

To the Gas Company: The installation described above has been completed and has been inspected and approval is granted for connection to your service.

DATE _____ PLUMBING INSPECTOR _____

Office File

STATE OF RHODE ISLAND

ELECTRICAL PERMIT APPLICATION

Office File

MUNICIPALITY WARWICK ISSUED 02/28/2007 NUMERICAL CODE 35 PERMIT NO. E07-263
 APPLICATION DATE 02/23/2007 CENSUS TRACT _____ FEE RECEIVED: \$ 41.00 BY _____

1. STREET LOCATION 19 JONQUIL DR POLE NO. or UNDERGROUND NO. _____
 2.3.4. PARCEL ID 213-0160-0000 5. FLOOR LOCATION _____
 6. USE OF STRUCTURE PREVIOUS 1 FAMILY HOME PROPOSED R-3 ONE AND TWO FAMI
 7. Temporary New Installation Change of Service Starting Date / / SRE # 2083076
 8. OWNER RAUGHT, THOMAS L, 19 JONQUIL DR, WARWICK, RI 02818 TEL. NO. _____
 9. ELECTRICAL CONTRACTOR RAPID ELECTRIC, 2 STARLINE WAY. SUITE 4 CRANSTON, RI TEL. NO. 943-5888
 10. ARCH. OR ENG. _____ ADDRESS _____ TEL. NO. _____
 11. STAMPED PRINTS YES NO 12. RHODE ISLAND REG. NO. _____ 13. CONTRACTOR'S LIC. NO. AC0236
 14. DESCRIPTION OF WORK TO BE PERFORMED _____
REVAMP SERVICE TO 100 AMP.

15. Service entrance voltage 100 Amperage 1 Phase 1 No. of Meters 2
 16. Wire size (cu. or al.) _____ Conductor Per Phase _____
 17. Estimated Load: Electrical Heat _____ k.w. Lights _____ k.w. Range _____ Dryer _____ Motors, H.P., Phase _____
 18. ESTIMATED COST OF COMPLETED INSTALLATION: \$ 800.00

MUNICIPAL ELECTRICAL PERMIT FEE:	= \$	<u>40.00</u>
CE & ADA FEE : <u>800.00</u> x .001	= \$	<u>1.00</u>
ESTIMATED COST x .001	= \$	<u>41.00</u>
(1 & 2 FAMILY DWELLINGS LIMITED TO CE & ADA FEE OF \$50.00)	TOTAL PERMIT FEE \$	<u>41.00</u>

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 application codes and ordinances of the municipality

ELECTRICAL CONTRACTOR'S SIGNATURE _____

DO NOT WRITE BELOW THIS LINE ELECTRICAL WIRING PERMIT

PERMIT GRANTED:
 DATE _____
 BY _____
 ELECTRICAL INSPECTOR

CERTIFICATE OF INSPECTION

DATE _____
 To the Electric Utility Company: The installation described above has been inspected and approval is granted for connection to your service.

 ELECTRICAL INSPECTOR

Office File