# Master Development Application Form

Use this form for all development permit applications

## Part 1. APPLICATION FOR

(Please check all application forms being submitted with this Master Application Form)

- [ ] Development Permit
- [ ] Major Development Plan Review
- [ ] Design Review of Tall Buildings
- [ ] Minor Development Plan Review
- [ ] District Plan
- [ ] Amendment to Zoning Map or USDO Text
- [ ] Lot Line Adjustment
- [ ] Conditional Use Permit
- [ ] Area Variance
- [ ] Lot Consolidation
- [ ] Demolition Review
- [ ] Use Variance
- [ ] Sidewalk and Outdoor Café Permit
- [ ] Subdivision of Land
- [ ] Floodplain Variance
- [ ] Certificate of Appropriateness
- [ ] Historic Property Hardship Modification
- [ ] Administrative Adjustment

## Part 2. Written Description of Proposed Project/Activity

375-5(f)(3)(d): No nonconforming use may be converted to a different nonconforming use unless the Board of Zoning Appeals determines that the alternative use is in the same or a less intensive land use category based on Table 3-1 (Permitted Use Table). See attached Narrative and Affidavits in support of application.

## Part 3. Property Information

- **Project Name (if applicable):**
- **Project Address:** 616 Madison, Albany NY
- **Tax Identification No:** 65.78-1-24
- **Lot Size (sq. ft.)** 0.05 acres
- **Zoning District:** R-T
- **Abutting Zone District(s):** R-M Multifamily

## Part 4. Property Owner Information

- **Property Owner(s) Name(s):** Madison Associates on the Park, LP
- **Mailing Address:** 612 Madison Avenue, Albany, NY 12208
- **Phone No:**
- **E-mail:** madisononthepark@yahoo.com

## Part 5. Applicant Information (if different than property owner)

- **Applicant Name:** Same
- **Mailing Address:** Same
- **Phone No:**
- **E-mail:**

## Part 6. Project Engineer Information (if applicable)

- **Company Name:** N/A
- **Engineer Name:**
- **License No:**
- **Mailing Address:**
- **Phone No:**
- **E-mail:**

## Part 7. Project Architect Information (if applicable)

- **Company Name:** Stracher-Roth-Gilmore, Architects
- **Architect Name:** Frank F. Gilmore, RA
- **License No:**
- **Mailing Address:** 143 Jay Street, Schenectady, NY 12305
- **Phone No:** 518-374-9412
- **E-mail:** gilmorefsrgarch.com

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*Master Application Form*  
Page 1 of 2  
Form Updated: May 2017
Part 8. Authorized Agent for this Application

Authorized Agent Name: Whitman, Osterman & Hanna, LLP; Thomas A. Shepardson, Esq.
Mailing Address: One Commerce Plaza, Albany NY
Phone No: (518) 487-7663
E-mail: tshepardson@woh.com

Part 9. Property Owner Consent

☐ I am the Owner and have no other agent or representative authorized to represent me in this application. I understand the application must be complete and accurate prior to a hearing being scheduled, if required, or a decision being made. I grant the City of Albany Department of Planning and Development permission to access the property for inspection.

☒ I hereby authorize the above listed Applicant and/or Agent to represent me in this application. I understand the application must be complete and accurate prior to a hearing being scheduled, if required, or a decision being made. I grant the City of Albany Department of Planning and Development permission to access the property for inspection.

Print Owner Name(s) Owner(s) Signature Date

[Signature]
7/26/17

[Signature]