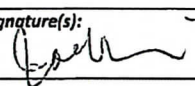


CITY OF ALBANY NEW YORK

DEPARTMENT OF PLANNING AND DEVELOPMENT
200 HENRY JOHNSON BOULEVARD | ALBANY, NEW YORK 12210

MASTER APPLICATION: USE THIS FORM FOR ALL DEVELOPMENT APPLICATIONS

Part 1. APPLICATION FOR (Please check all applications being submitted with this Master Application Form)		
<input type="checkbox"/> Administrative Adjustment	<input type="checkbox"/> Demolition Review	<input type="checkbox"/> Historic Property Hardship Modification
<input type="checkbox"/> Amendment to Zoning Map or USDO Text	<input type="checkbox"/> Design Review of Tall Buildings	<input type="checkbox"/> Lot Modification
<input type="checkbox"/> Area Variance	<input checked="" type="checkbox"/> Development Plan Review	<input type="checkbox"/> Wall Display Application
<input type="checkbox"/> Certificate of Appropriateness	<input type="checkbox"/> District Plan	<input type="checkbox"/> Special On-Premises Sign Program
<input checked="" type="checkbox"/> Conditional Use Permit	<input type="checkbox"/> Floodplain Variance	<input checked="" type="checkbox"/> Other: Major Development Review
Part 2. Brief Description of Proposed Project / Activity		
Establishment of a blood plasma collection office in an existing space of approximately 11,000 square feet. The proposed location is in the Hannaford Plaza located at 900 Central Avenue, involving interior alterations and exterior signage.		
Part 3. Property Information		
Project Name (if applicable): CSL Plasma - Hannaford Plaza		
Project Address: 900 Central Avenue, Albany		
Tax Identification No.: 53.83-1-5, 53.75-1-10	Lot Size (sq. ft.): 483,516(11.1 ac)	
Zoning District: MU-CH	Abutting Zone District(s): R-1M	
Part 4. Property Owner Information		
Property Owner(s) Name(s): SOMERSET ASSOCIATES, L.P., 900 CENTRAL AVENUE, LLC, DEDHAM POST FUNDING LLC, and CENTRAL COLVIN REALTY, LLC		
Mailing Address: c/o Nigro Companies (attn: Lisa Nigro Ferguson), 20 CORPORATE WOODS BOULEVARD ALBANY, NEW YORK, 12211		
Phone No.: 518-436-8421	Email: lisaj@nigrococs.com	
Part 5. Applicant Information (if different than property owner)		
Applicant Name:		
Mailing Address:		
Phone No:	Email:	
Part 6. Project Engineer/Surveyor Information (if applicable)		
Company Name: Not yet identified	Engineer or Surveyor Name: RDM	License No.:
Mailing Address: 8 Grange Road, Troy, NY 12180		
Phone No.: (518) 279-3424	Email:	
Part 7. Project Architect Information (if applicable)		
Company Name: Not yet identified	Architect Name: Bergmann Associates	License No.:
Mailing Address: 2 Winners Circle, Suite 102, Albany, NY 12205		
Phone No.: (518) 862-0325	Email:	
Part 8. Authorized Agent for this Application		
Authorized Agent Name: Bartlett, Pontiff, Stewart & Rhodes, P.C. (John D. Wright, Esq. and Jonathan C. Lapper, Esq.)		
Mailing Address: PO BOX 2168, GLENS FALLS, NEW YORK 12801		
Phone No.: 518-792-2117	Email: jdww@bpsrlaw.com	
Part 5. Property Owner Consent (Check the box below that applies to this application and sign in the space indicated below)		
<input type="checkbox"/> I am the Owner and have no other agent or representative authorized to represent me in this and other corresponding applications subject to review under the USDO. 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.		
<input checked="" type="checkbox"/> I hereby authorize the above listed Applicant and/or Agent to represent me in this and other corresponding applications subject to review under the USDO. I understand the application must be complete and accurate prior to a hearing being scheduled, if require, 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): JOHN J. NIGRO (Managing Member, 900 Central Avenue, LLC)	Owner(s) Signature(s): 	Date: 2/18/20