

CITY OF ALBANY



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

FOR STAFF USE ONLY	
Date Submitted:	Project #:

MASTER APPLICATION: USE THIS FORM FOR ALL DEVELOPMENT APPLICATIONS

Part 1. APPLICATION FOR (Please check all application forms being submitted with this Master Application Form)		
<input type="checkbox"/> Development Plan Review	<input type="checkbox"/> Design Review of Tall Buildings	<input type="checkbox"/> Amendment to Zoning Map or USDO Text
<input type="checkbox"/> Administrative Adjustment	<input type="checkbox"/> District Plan	<input checked="" type="checkbox"/> Area Variance
<input type="checkbox"/> Lot Line Adjustment	<input type="checkbox"/> Conditional Use Permit	<input type="checkbox"/> Use Variance
<input type="checkbox"/> Lot Consolidation	<input type="checkbox"/> Demolition Review	<input type="checkbox"/> Floodplain Variance
<input type="checkbox"/> Subdivision of Land	<input type="checkbox"/> Certificate of Appropriateness	<input type="checkbox"/> Historic Property Hardship Modification
Part 2. Brief Description of Proposed Project / Activity		
Verizon - signage		
Part 3. Property Information		
Project Name (if applicable): Verizon		
Project Address: 158 State St		
Tax Identification No.: 76,7-1-2.1	Lot Size (sq. ft.):	
Zoning District: MU-DT	Abutting Zone District(s):	
Part 4. Property Owner Information		
Property Owner(s) Name(s): Verizon		
Mailing Address: 201 S. State St Syracuse NY 13202		
Phone No.: (315) 479 4874	E-mail:	
Part 5. Applicant Information (if different than property owner)		
Applicant Name: AJSigns		
Mailing Address: 842 Saratoga Rd Burnt Hills NY 12027		
Phone No.: (518) 399 9291	E-mail:	
Part 6. Project Engineer Information (if applicable)		
Company Name:	Engineer Name:	License No.:
Mailing Address: MA		
Phone No.:	E-mail:	
Part 7. Project Architect Information (if applicable)		
Company Name:	Architect Name:	License No.:
Mailing Address: MA		
Phone No.:	E-mail:	
Part 8. Authorized Agent for this Application		
Authorized Agent Name: Thomas Wheeler AJSigns		
Mailing Address: 842 Saratoga Rd Burnt Hills		
Phone No.: (518) 399 9291	E-mail: Tom@AJSigns.com	
Part 5. Property Owner Consent (Check the box below that applies to this application and sign in the space indicated below)		
<input checked="" 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): Todd Jantsch	Owner(s) Signature:	Date: 11/27