## CITY OF ALBANY

Date Submitted: 01/04/18 Project #: 00078

FOR STAFF USE ONLY

## MASTER APPLICATION: USE THIS FORM FOR ALL DEVELOPMENT APPLICATIONS

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

Part 1. APPLICATION FOR (Please	e check all applicat	ion forms being subm	litted with this Master Ap	plication Form)
☐ Development Plan Review	☐ Design Review of Tall Buildings		☐ Amendment to Zoning Map or USDO Text	
☐ Administrative Adjustment	☐ District Plan		☐ Area Variance	
☐ Lot Line Adjustment	Conditional Use Permit		☐ Use Variance	
☐ Lot Consolidation	☐ Demolition Review		☐ Floodplain Variance	
☐ Subdivision of Land	☐ Certificate of Appropriateness		☐ Historic Property Hardship Modification	
Part 2. Brief Description of Proposed Project / Activity				
Establishment of a restaurant in a Residential Townhouse zoning district				
Part 3. Property Information				
Project Name (if applicable): Belt Line 3				
Project Address: 340 Hamilton Street, Albany, NY				
Tax Identification No.: 76.32-3-3.1	Lot Size (sq. ft.): 2150		-1	
Zoning District: R-T	Abutting Zone Districts(s):			
Part 4. Property Owner Information				
Property Owner(s) Name(s): Beaumont and Beaumont, LLC  Mailing Address: 340 Hamilton Street, Albany NY 12210				
	street, Alba			
Phone No.:		E-mail: r		
Part 5. Applicant Information (if different than property owner)				
Applicant Name:				
Mailing Address:				
Phone No:		E-mail:		
Part 6. Project Engineer Information (if applicable)				
Company Name: Mailing Address:	Engineer N	ame:	License	No.:
Phone No.:		F 21		
	ert 7 Project Archite	E-mail:	vlicoble)	Market Co. Co. Co.
Part 7. Project Architect Information (if a Company Name:  Architect Name:		The second secon	License No.:	
Mailing Address:	Architectiv	ame.	License	NO.:
Phone No.:		E-mail:		
Part 8. Authorized Agent for this Application				
Authorized Agent Name: Marisa Teller				
Mailing Address: 255 Jericho Road Selkirk, NY 12	158			
Phone No.: 518-424-4991	E-mail: mt@strategicpensions.com			
Part 5. Property Owner Consent (Check the box below that applies to this application and sign in the space indicated below)				
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.				
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): Owner(s) Signature: Mana lelle Date:				
Print Owner Name(s):  Marisa & Everett W. Teller  Owner(s) Signature: hairs letter  Date:  1/3/20				1/3/2018