CITY OF ALBANY



FOR STAFF USE ONLY

Date Submitted: 3/19/18 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)		
☐ 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		
Part 2. Brief Description of Proposed Project / Activity Make (2) 2" Penetrations on Jefferson Street side of building for venting.		
Part 3. Property Information		
Project Name (if applicable):		
Project Address: 125 Jefferson Street		
Tax Identification No.: 76.32-4-2		4,620
Zoning District: MU-NE	Abutting Zone Dis	tricts(s): R - T
Part 4. Property Owner Information		
Property Owner(s) Name(s): Anthony Catalano		
Mailing Address: 227 Quail		V.Y. 12203
Mailing Address: 227 Quail Street Albany N.V. 12203 Phone No.: (5(8) 788-1296 E-mail:		
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:	Engineer Name:	License No.:
Mailing Address:		
Phone No.: E-mail:		
Part 7. Project Architect Information (if applicable)		
Company Name:	Architect Name:	License No.:
Mailing Address:	Т	
Phone No.: E-mail:		
Part 8. Authorized Agent for this Application		
Authorized Agent Name:		
Mailing Address: Phone No.:	E-mail:	
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): Anthony Catalano Jr Owner(s) Signature Date: 3-19-18		