

CITY OF ALBANY



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

FOR STAFF USE ONLY	
Date Submitted: 4.5.18	Staff: EG
Project #: 00180	

MASTER DEVELOPMENT FORM: USE THIS FORM FOR ALL DEVELOPMENT APPLICATIONS

Part 1. Application For

(Please check all application forms being submitted with this Master Development 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 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 checked="" type="checkbox"/> Certificate of Appropriateness	<input type="checkbox"/> Historic Property Hardship Modification

Part 2. Written Description of Proposed Project/Activity

Part 3. Project Information

Project Name (if applicable):	
Project Address: 175 JAY ST	
Tax Identification Number:	Lot Size (sq. ft.):
Zoning District:	Abutting Zone District(s):

Part 4. Property Owner Information

Property Owner(s) Name(s): JAY ST APARTMENTS LLC	
Mailing Address: P.O. BOX 9266 SCHENECTADY NY 12309	
Phone Number: 518 441 8101 ERIC MOZES	Email:

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

Applicant Name: FERNANDO J. CONTRACTING LLC	
Mailing Address: 71 LOWN AV, ALBANY NY 12204	
Phone Number: 518 265 792	Email: EZEMOSES@HOTMAIL.COM

Part 6. Project Engineer Information (if applicable)

Company Name:	Engineer Name:	License No:
Mailing Address:		
Phone Number:	Email:	

Part 7. Project Architect Information (if applicable)

Company Name:	Architect Name:	License Number:
Mailing Address:		
Phone Number:	Email:	

Part 8. Authorized Agent for this Application

Authorized Agent Name: FERNANDO CONTRACTING LLC. FERNANDO REIS
Mailing Address: FERNANDO@HOTMAIL.COM 71 LAWN AV, ALBANY NY 12204
Phone Number: 5182655792 Email: FERNANDO@HOTMAIL.COM

Part 9. 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

Date