

CITY OF ALBANY



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

FOR STAFF USE ONLY
Date Submitted: 5/7/2018 Project #: 00185

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 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. Brief Description of Proposed Project / Activity

A mural of Henry Johnson & his regiment on the side of the building facing Henry Johnson Boulevard. A rendering of the mural is attached.

Part 3. Property Information

Project Name (if applicable): 337 Clinton Avenue Mural
 Project Address: 337 Clinton Avenue, Albany, NY 12210
 Tax Identification No.: 65.64-5-22 Lot Size (sq. ft.): 2170
 Zoning District: MU-NE Abutting Zone Districts(s): MU-CU, R-T, R-2

Part 4. Property Owner Information

Property Owner(s) Name(s): Albany County Land Bank Corporation
 Mailing Address: 69 State Street, 8th Floor Albany, NY 12207
 Phone No.: 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:
 Phone No.: E-mail:

Part 8. Authorized Agent for this Application

Authorized Agent Name: Keturia Vics & Rodney Fontus
 Mailing Address: 69 State Street, 8th Floor Albany, NY 12207
 Phone No.: (518) 407-0309 E-mail: KVICS@albanycountylandbank.org

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): Albany County Land Bank Owner(s) Signature: [Signature] Date: 5/7/18
 Adam Zoranko, Executive Director Adam Zoranko