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

Area variances to allow for signs, replacement of sign/sign content due to a name change to the building.

Part 3. Property Information

Project Name (if applicable): 1475 Washington Avenue
Project Address: 1475 Washington Avenue
Tax Identification No.: 53-1-30
Lot Size (sq. ft.): apx. 43,560 sq. ft. (1 acre)
Zoning District: MU-CU
Abutting Zone Districts(s):

Part 4. Property Owner Information

Property Owner(s) Name(s): 1475 Washington Avenue Associates, LLC
Mailing Address: c/o Donald Zee, P.C. 1 Winners Circle, Suite 140, Albany, NY 12205
Phone No.: 518-489-9423  E-mail: donaldzeepc@msn.com

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

Applicant Name: N/A
Mailing Address:
Phone No.: E-mail:

Part 6. Project Engineer Information (if applicable)

Company Name: N/A
Engineer Name: License No.: E-mail:
Mailing Address:
Phone No.: E-mail:

Part 7. Project Architect Information (if applicable)

Company Name: N/A
Architect Name: License No.: E-mail:
Mailing Address:
Phone No.: E-mail:

Part 8. Authorized Agent for this Application

Authorized Agent Name: Donald Zee, P.C. (Andrew Brick, Esq.)
Mailing Address: 1 Winners Circle Suite 140, Albany, NY 12205
Phone No.: 518-489-9423  E-mail: donaldzeepc@msn.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 required, 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: 06/08/2018

Master Application Form