

CITY OF ALBANY NEW YORK

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

MASTER APPLICATION: USE THIS FORM FOR ALL DEVELOPMENT APPLICATIONS

Part 1. APPLICATION FOR (Please check all applications being submitted with this Master Application Form)

<input type="checkbox"/> Administrative Adjustment	<input type="checkbox"/> Demolition Review	<input type="checkbox"/> Historic Property Hardship Modification
<input type="checkbox"/> Amendment to Zoning Map or USDO Text	<input type="checkbox"/> Design Review of Tall Buildings	<input type="checkbox"/> Lot Modification
<input type="checkbox"/> Area Variance	<input checked="" type="checkbox"/> Development Plan Review	<input type="checkbox"/> Wall Display Application
<input type="checkbox"/> Certificate of Appropriateness	<input type="checkbox"/> District Plan	<input type="checkbox"/> Special On-Premises Sign Program
<input type="checkbox"/> Conditional Use Permit	<input type="checkbox"/> Floodplain Variance	<input type="checkbox"/> Other: _____

Part 2. Brief Description of Proposed Project / Activity

CONVERSION OF EXISTING OFFICE BUILDING TO MULTI-FAMILY RESIDENTIAL - 61 DWELLING UNITS

Part 3. Property Information

Project Name (if applicable): 90 S. SWAN ST.
 Project Address: 90 S. SWAN ST.
 Tax Identification No.: 76.24-7-44
 Zoning District: MU-CU
 Lot Size (sq. ft.): 12,768 SF
 Abutting Zone District(s): R-T, R-M, MU-NE, MU-C1

Part 4. Property Owner Information

Property Owner(s) Name(s): MAN REALTY LLC
 Mailing Address: 1650 EASTERN PARKWAY BROOKLYN, NY 11233
 Phone No.: 347-459-2830
 Email: shneur@4drealtyct.com

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

Applicant Name: NOLAN ENGINEERING PLLC
 Mailing Address: 333 KINGSLEY RD BURNT HILLS NY 12027
 Phone No.: 518-280-3190
 Email: rich@nolan-engineering.com

Part 6. Project Engineer/Surveyor Information (if applicable)

Company Name: NOLAN ENGINEERING
 Mailing Address: SAME AS ABOVE
 Engineer or Surveyor Name: RICH NOLAN
 License No.: 83929
 Phone No.: _____
 Email: _____

Part 7. Project Architect Information (if applicable)

Company Name: _____
 Mailing Address: _____
 Architect Name: _____
 License No.: _____
 Phone No.: _____
 Email: _____

Part 8. Authorized Agent for this Application

Authorized Agent Name: NOLAN ENGINEERING, PLLC
 Mailing Address: SAME AS ABOVE
 Phone No.: _____
 Email: _____

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): Gershon Eichorn

Owner(s) Signature(s): *Gershon Eichorn*

Date: 3/16/20