

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

**Part 2. Brief Description of Proposed Project / Activity**

Installation of a 6ft opaque fence around the perimeter of our backyard.

**Part 3. Property Information**

Project Name (if applicable): Fence Installation

Project Address: 40 S Manning Blvd

Tax Identification No.: 64.50-2-15 Lot Size (sq. ft.): 8400 sq ft

Zoning District: R-1M Abutting Zone District(s): \_\_\_\_\_

**Part 4. Property Owner Information**

Property Owner(s) Name(s): Brett + Alacia Sears

Mailing Address: 40 S Manning Blvd

Phone No.: (518) 596-4511 Email: bauerscars@gmail.com

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

Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone No: \_\_\_\_\_ Email: \_\_\_\_\_

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

Company Name: \_\_\_\_\_ Engineer or Surveyor Name: \_\_\_\_\_ License No.: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

**Part 7. Project Architect Information (if applicable)**

Company Name: \_\_\_\_\_ Architect Name: \_\_\_\_\_ License No.: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

**Part 8. Authorized Agent for this Application**

Authorized Agent Name: Brett + Alacia Sears

Mailing Address: 40 S Manning Blvd

Phone No.: (518) 596-4511 Email: bauerscars@gmail.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 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): <u>Brett A Sears</u> <u>Alacia Bauer sears</u>	Owner(s) Signature(s): <u>[Signature]</u> <u>[Signature]</u>	Date: <u>4/25/2021</u>
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