

AYZO RIDGE DESIGN + CONSULTANTING
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300 Great Oaks Blvd. Albany, NY 12203



DESIGN INTENT PACKAGE
PREPARED FOR:

KIPP:Albany
COMMUNITY PUBLIC SCHOOLS

KIPP Albany Community Charter Middle School
42 South Dove Street Albany NY
Zone: MU-NE Neighborhood Center

2021 V. 1.0

KIPP-Design Intent Package 2021 AZR 10899

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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 type="checkbox"/> Development Plan Review	<input type="checkbox"/> Wall Display Application
<input type="checkbox"/> Certificate of Appropriateness	<input type="checkbox"/> District Plan	<input checked="" 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		
<p style="font-size: 1.2em;">Replacement and renovations to existing signage to better identify the middle school under KIPP branding guidelines</p>		
Part 3. Property Information		
Project Name (if applicable): <u>Middle School Signage Remodel</u>		
Project Address: <u>42 South Dove St</u>		
Tax Identification No.: <u>76.14-2-7.2</u>	Lot Size (sq. ft.): <u>1.49</u>	
Zoning District: <u>MU-NE</u>	Abutting Zone District(s):	
Part 4. Property Owner Information		
Property Owner(s) Name(s): <u>Albany Community Charter School</u>		
Mailing Address: <u>65 Krank St Albany NY 12202</u>		
Phone No.: <u>(518) 929-6569</u>	Email: <u>kbetter@kipptechvalley.com</u>	
Part 5. Applicant Information (if different than property owner)		
Applicant Name: <u>Ayzo Ridge Design + Consultants LLC</u>		
Mailing Address: <u>300 Great Oaks Blvd Suite 300-004 Albany NY 12203</u>		
Phone No.: <u>(518) 216-0620</u>	Email: <u>bevisual@ayzobridge.com</u>	
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: <u>Bridgette Shoemaker, Ayzo Ridge Design</u>		
Mailing Address: <u>300 Great Oaks Blvd Suite 300-004 Albany NY 12203</u>		
Phone No.: <u>(518) 216-0620</u>	Email: <u>bevisual@ayzobridge.com</u>	
Part 5. Property Owner Consent (Check the box below that applies to this application and sign in the space indicated below)		
<input type="checkbox"/> 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.		
<input checked="" type="checkbox"/> 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>Kate Better</u>	Owner(s) Signature(s):	Date: