MASTER APPLICATION: USE THIS FORM FOR ALL DEVELOPMENT APPLICATIONS

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

- ☐ Administrative Adjustment
- ☐ Amendment to Zoning Map or USDA Text
- ☐ Area Variance
- ☐ Certificate of Appropriateness
- ☐ Conditional Use Permit
- ☐ Development Plan Review
- ☐ Design Review of Tall Buildings
- ☐ Development Review
- ☐ Disturbance ofessel Land
- ☐ Floodplain Variance
- ☐ Historic Property Hardship Modification
- ☐ Lot Modification
- ☐ Special On-Premises Sign Program
- ☐ Wall Display Application
- ☐ Other:

Part 2. Brief Description of Proposed Project / Activity

To amend the Unified Development Ordinance of the City of Albany to ensure that no building permit or demolition permit is issued prior to any condition precedent set by a City, County, State or Federal agency or department, is met. This legislation also seeks to remove the waiver provision of the Unified Development Ordinance pertaining to Major Development Plan Review.

Part 3. Property Information

- Project Name (if applicable): Not Applicable
- Project Address: Not Applicable
- Tax Identification No.: Not Applicable
- Zoning District: Not Applicable
- Lot Size (sq. ft.): Not Applicable
- Abutting Zone District(s): Not Applicable

Part 4. Property Owner Information

- Property Owner(s) Name(s): Not Applicable
- Mailing Address: Not Applicable
- Phone No.: Not Applicable
- Email: Not Applicable

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

- Applicant Name: Thomas Hoey
- Mailing Address: 19 Vine Street, Albany, NY 12203
- Phone No.: 5183781474
- Email: thoey@albany.gov

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: John-Raphael Pichardo, Esq.
- Mailing Address: City Hall, 24 Eagle Street, Room 202, Albany NY 12207
- Phone No.: 5184345123
- Email: jrichard@albany.gov

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 USDA. 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 USDA. 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):
Thomas Hoey

Owner(s) Signature(s):
[Signature]

Date: 2/5/2020