



TOWN OF NEW PALTZ

Wetlands & Watercourse Referral Regulated Activities Short Form Application

Application Date: _____

Section: _____ Block: _____ Lot: _____ Zone: _____

Address of the Parcel: _____

Applicant's Name: _____

Applicant's Address (if different from above) : _____

Applicant's Telephone#: _____

Is the applicant the owner of the property? Yes No

Property owner's name, if not the applicant: _____ (Attach written consent by owner)

Description of the proposed work:

Explain why the proposed activity cannot be located outside of regulated areas.

Signature of Applicant: _____

Do Not Write Below this line

Reason for referral: _____

Referred to: _____ Date Referred: _____

