



Town of New Paltz Planning Board

ESCROW AUTHORIZATION FORM

PB# 22-89

Name of Project Shapiro & Grymes Site Plan

Applicant Rachel Shapiro & Chris Grymes

Applicant's Address 11 Coffey Rd.

Applicant's Telephone Number 917-859-1865

E-Mail rachel1shapiro1@gmail.com

Initial Authorization:
Town Supervisor Authorization
Ul Beltz

Date _____

Escrow Initial Deposit \$1,500⁰⁰

Replenishment \$750⁰⁰

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Planning Board Acceptance _____ Date _____

Modifications? Escrow Initial Deposit _____ Replenishment _____

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Final Town Board Sign-off Date:

*This form requires 3 signatures for audit purposes.
(* This form is used for bookkeeping purposes only. It is not part of the public record of the Planning Board Application file.)*