



Town of New Paltz Planning Board

ESCROW AUTHORIZATION FORM

PB#: 22-422

Name of Project: Subdivision/Lot Line

Applicant: Matthew Aube

Applicant's Address: 4 Julia Avenue

Applicant's Telephone Number: 845-797-5512 E-Mail: matthewaube@gmail.com

Initial Authorization: _____

Town Supervisor Authorization:

M. Aube

Date _____

Escrow Initial Deposit \$ 3500

Replenishment \$ 1750

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✓ Planning Board Acceptance *J. Aube*

Date 11/15/22

Modifications: Escrow Initial Deposit \$ 3500

Replenishment \$ 1750

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.)*