



# Town of New Paltz

## Planning Board

### ESCROW AUTHORIZATION FORM

**PB#: 23-006**

**Name of Project:** 1 MARE'S TRAIL WETLAND PERMIT

**Applicant:** Hudson Valley Contractors /Robert Cohn

**Applicant's Address:** 1 Mare's Trail

**Applicant's Telephone Number:** 845-721-8530      **E-Mail:** hvcontract@gmail.com

**Initial Authorization:** \_\_\_\_\_

**Town Supervisor Authorization:**

\_\_\_\_\_ *M. L. Bell*

**Date** 1/26/23

**Escrow Initial Deposit** \$2,500.00

**Replenishment** \$625.00

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**Planning Board Acceptance** \_\_\_\_\_ *John Z*

**Date** 1/23/23

**Modifications: Escrow Initial Deposit** \_\_\_\_\_ **Replenishment** \_\_\_\_\_

**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.)*



## Town of New Paltz Planning Board

NOTE: Only one  
(1) original of  
this form should  
be submitted  
with your  
application.

### PROJECT SUMMARY FORM

Date Received: 01/06/23

Fee Paid: \$250

Escrow Initial Deposit: \$2,500.00    Replenishment: \$625.00

Name of Project: 1 Mare's Trail Wetland Permit

Property Address: ONE MARE'S TRAIL

Tax Map S-B-L: 78.16-1-6-440

*(Office use only – do not write above this line)*

Owner Name: HUDSON VALLEY CONTRACTORS INC./ROBERT COHN

Applicant: HUDSON VALLEY CONTRACTORS INC.

Applicant's Address: 3 MARE'S TRAIL

Applicant's Telephone Number: 845-721-8530    E-Mail: hvcontract@gmail.com

Escrow Guarantor/Payor: Hudson Valley Contractors Inc.  
Name/Title/Contact No.

Tax ID for Escrow Account: 14-1656022

Robert Cohn (President)  
Signature of Applicant (or authorized agent)

1/24/23  
Date

NOTE: This form is used for bookkeeping purposes only.  
It is **not** part of the public record of the Planning Board Application file.  
This information will be used for monthly escrow billing only.