

ESCROW AGREEMENT

This Agreement is made this _____ day of _____, 20_____.

BETWEEN: Applicant/Developer and Owner of Land

AND: The Combined Planning & Zoning Board of the Township of Elk on behalf of the Township of Elk

This is an agreement establishing the responsibility for the payment of escrow obligations to the Township of Elk.

NAME AND ADDRESS OF APPLICANT/DEVELOPER:

Country Roads Realty, LLC

219 North Vineyard Boulevard

Collingswood, NJ 08108

Telephone Number: 732-618-7813
Fax number: _____

email: paul.ploskonka@athcultivation.com

NAME AND ADDRESS OF PROPERTY OWNER:

Country Roads Realty, LLC

219 North Vineyard Boulevard

Collingswood, NJ 08108

Telephone Number: 732-618-7813

email: paul.ploskonka@athcultivation.com

Block 44, Lot 4

1. Whenever a review fee shall be required the applicant/developer together with the Planning Board or Zoning Board of Adjustment, shall execute an agreement, in writing, with copies for each party providing the following as to escrow agreements:

- (a) The agreement shall be signed by the developer/applicant and the appropriate Board at the time of the application.
- (b) The subject matter of the application shall be specifically identified by lot and block designation as found on the Tax Map of Elk Township.
- (c) The full name of the applicant/developer with applicant's address, telephone number and fax number shall be included.
- (d) The purpose for the escrow shall be defined in accordance with the application.

- (e) The agreement shall provide the applicant/developer's responsibility to maintain an adequate reserve of funds for the payment in accordance with the provisions of this subsection.
- (f) In the event the escrow shall be deficient at any time the Board having jurisdiction shall declare the application incomplete.
- (g) Any excess funds remaining in the escrow fund after 45 days after final approval shall be returned to the applicant.
- (h) If an applicant, or any person who has greater than a 10 percent interest in any legal entity which is an applicant, shall at any time have a deficient escrow account on any parcel within Elk Township, such escrow account shall be brought current prior to the Planning Board or Zoning Board considering any new application for development of any parcel or parcels within Elk Township involving the person with the deficient escrow.
- (i) In addition to the other remedies provided to the Boards set forth herein, the applicant shall indemnify and reimburse Elk Township for the attorney's fees and costs relating to the collection of all delinquent or deficient escrow balances. All escrow balances shall be considered deficient if they are not paid in full within twenty (20) days of notification from the CFO.

2. If at any time the escrow fund is found to be insufficient to cover all reasonable fees for the required professional services, the applicant shall be notified, in writing, and the applicant shall within 10 days increase the fund as shall be determined by the CFO. In the event the applicant shall fail to deposit the required fees, the reviewing Board shall be entitled to declare the application incomplete. Any excess funds in the escrow fund remaining 45 days after final action has been taken by the reviewing Board shall be returned to the applicant.

APPLICANT/ DEVELOPER:
 Archer & Greiner, P.C. - Attorneys for Applicant / Co-Owner 27th DAY OF December 20 09.
 (Signature of Applicant/ Developer)
 BY: Richard T. Wells, Esq.

SWORN AND SUBSCRIBED BEFORE ME THIS
 (NOTARY)

ERIN M CONOLLY
 NOTARY PUBLIC OF NEW JERSEY
 My Commission Expires March 5, 2027

PROPERTY OWNER:
 Archer & Greiner, P.C. - Attorneys for Applicant / Co-Owner 27th DAY OF December 20 29.
 (Signature of Property owner)
 BY: Richard T. Wells, Esq.

SWORN AND SUBSCRIBED BEFORE ME THIS
 (NOTARY)

ERIN M CONOLLY
 NOTARY PUBLIC OF NEW JERSEY
 My Commission Expires March 5, 2027

Elk Township Planning/Zoning Board:

Ann Marie Weitzel, Secretary

SWORN AND SUBSCRIBED BEFORE ME THIS
 DAY OF 20
 (NOTARY)

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)		
	2 Business name/disregarded entity name, if different from above.		
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. ☐ Individual/sole proprietor ☐ C corporation ☐ S corporation ☐ Partnership ☐ Trust/estate ☐ LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. ☐ Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)	
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions ☐		
	5 Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)	
	6 City, state, and ZIP code		
	7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

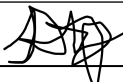
Social security number											
				-				-			
or											
Employer identification number											
					-						

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person 	Date 12/10/24
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they