

Government of the Virgin Islands/ Department of Planning and Natural Resources
Division of Comprehensive and Coastal Zone Planning

CCZP Fees

Checks and money orders should be made out to: Department of Planning and Natural Resources

Date: 4-3-2024

Name of Applicant: VIRGIN ISLANDS PROPANE LLC

Copies:	Zoning Fees:	Subdivision Fees	Other:
\$2 per page	Application Fee: \$250	Application Fee: \$10	
Total number of pages:	Additional Fees per acre: 5	Additional Fees per acre: _____	
Total due: \$	Total due: \$255.00	Total due: \$	Total due: \$

Staff's Signature: LEIA LAPLACE, TERRITORIAL PLANNER



PAID - 4/9/2024 - smd

card - \$255.00


GOVERNMENT OF THE VIRGIN ISLANDS

OFFICIAL CASHIER RECEIPT NO. **3649806**

ISLAND STT <input type="checkbox"/> STX <input type="checkbox"/> STJ <input type="checkbox"/>	DEPT. ORG. 6535	DATE 4/9/2004
LOCATION: PROP. PRO <input type="checkbox"/> ADMIN OFF <input type="checkbox"/> EDA <input type="checkbox"/> PNR <input type="checkbox"/> DPS <input type="checkbox"/> HEALTH <input type="checkbox"/> HOUSING <input type="checkbox"/> LIC <input type="checkbox"/> TERR. COURT <input type="checkbox"/> PWD <input type="checkbox"/> LT GOV <input type="checkbox"/> SBDA <input type="checkbox"/> TREAS <input type="checkbox"/> SPEC. FAC. <input type="checkbox"/> EMP SEC. OTHER <input type="checkbox"/> _____		

RECEIVED FROM: CHECK NO. **card** CASH

Sirri I. Hamad
Two hundred fifty-five, 00/100 DOLLARS

COLLECTOR'S SIGNATURE 	\$ 255.00
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PURPOSE OF PAYMENT **Zoning Fees**

FUND OR ACCOUNT DESCRIPTION				
TITLE VI Propane LLC				
CODE				
ORG	OBJECT	PROJECT	OPT	CHARGE CODE