

**Mono County  
Community Development Department**

PO Box 347  
Mammoth Lakes, CA 93546  
(760) 924-1800, fax 924-1801  
commdev@mono.ca.gov

**Planning Division**

PO Box 8  
Bridgeport, CA 93517  
(760) 932-5420, fax 932-5431  
[www.monocounty.ca.gov](http://www.monocounty.ca.gov)

**DIRECTOR REVIEW  
APPLICATION**

APPLICATION # _____	FEE \$ _____
DATE RECEIVED _____	RECEIVED BY _____
RECEIPT # _____	CHECK # _____ (NO CASH)

**APPLICANT/AGENT** Dan Jenkins

ADDRESS: PO Box 1 CITY/STATE/ZIP: Bridgeport, CA 93517

TELEPHONE ( 760 ) 914-1822 E-MAIL teleboy11@mac.com

**OWNER**, if other than applicant \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

TELEPHONE ( \_\_\_\_\_ ) \_\_\_\_\_ E-MAIL \_\_\_\_\_

**DESCRIPTION OF PROPERTY:**

Assessor's Parcel # 008-142-002 General Plan Land Use Designation: commercial

**PROPOSED USE:** Applicant(s) should describe the proposed project in detail, using additional sheets if necessary. Note: An incomplete or inadequate project description may delay project processing.

Applicate is in the process of submitting a building permit application to install a new PV solar system with battery back-up. All the solar equipment will be installed on or in Building B (see site map). Moving the current overhead power drop from the back of building A to the end of building B would facilitate the most efficient installation.

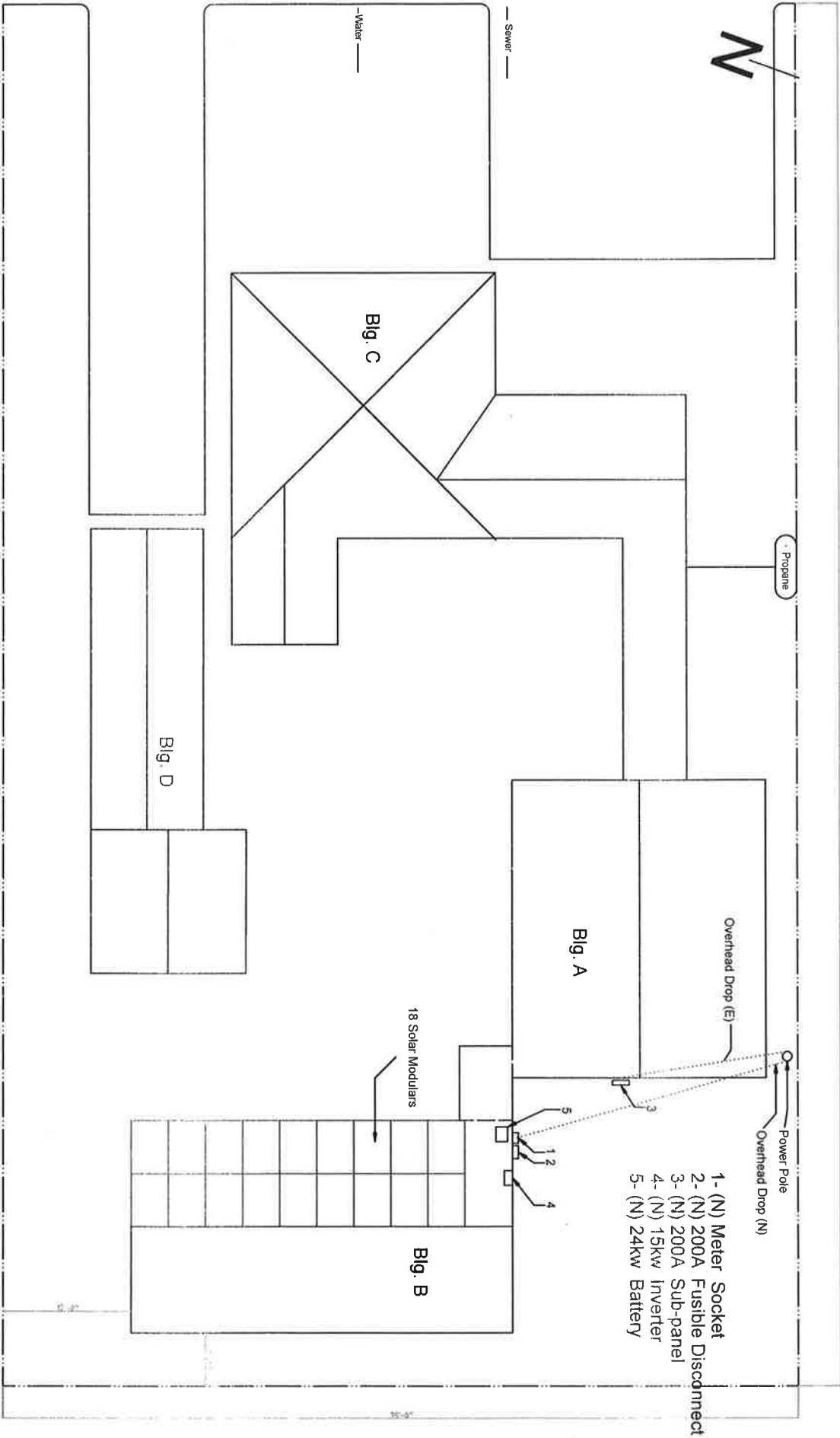
I CERTIFY UNDER PENALTY OF PERJURY THAT I am: → legal owner(s) of the subject property (all individual owners must sign as their names appear on the deed to the land), → corporate officer(s) empowered to sign for the corporation, or → owner's legal agent having Power of Attorney for this action (a notarized "Power of Attorney" document must accompany the application form), AND THAT THE FOREGOING IS TRUE AND CORRECT.

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

1-5-23  
\_\_\_\_\_  
Date

Laurel Ave.



VIEW FROM LAUREL AVE.



REMOVE THESE TWO METERS & EQUIPMENT  
GO TO ONE METER ON BUILDING "B"



