

**Mono County
Community Development Department**

PO Box 347
Mammoth Lakes CA, 93546
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commdev@mono.ca.gov

Planning Division

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

**USE PERMIT
APPLICATION**

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

* **APPLICANT/AGENT** Remy Oscar Lopez
ADDRESS [REDACTED] **CITY/STATE/ZIP** June lake CA 93529
TELEPHONE [REDACTED] **E-MAIL** Ssamantha.lopez14@gmail.com
OWNER, if other than applicant The Lift, LLC
ADDRESS 2587 Hwy 158 **CITY/STATE/ZIP** June Lake, CA 93529
TELEPHONE [REDACTED] **E-MAIL** theliftjunelake@gmail.com
PROPERTY DESCRIPTION: 2587 Hwy 158 June Lake, CA 93529
Assessor's Parcel # 015086001000 **General Plan Land Use Designation** C

PROPOSED USE: Describe the proposed project in detail, using additional sheets if necessary.

NOTE: An incomplete or inadequate project description may delay project processing.

We would like to have a food truck vendor in our parking lot operate in the evenings and during our cafe's off hours of business to utilize the space and provide more food & beverage options for our town and its patrons.

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.

Mairbeth Krumey
Signature

Signature

4/15/23
Date

HIGHWAY 158

LAKEVIEW DRIVE

Emp spaces

22 spaces for SFR

