



GOVERNMENT OF THE VIRGIN ISLANDS OF THE UNITED STATES

DEPARTMENT OF PLANNING AND NATURAL RESOURCES

Division of Coastal Zone Management
Cyril E. King Airport Terminal Building Second Floor
St. Thomas, Virgin Islands 00802

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**REQUEST FOR AMENDMENT /MODIFICATION TO
MINOR COASTAL ZONE PERMITS No. CZT-25-10L**

**This request is pursuant to Chapter 21, Title 12 of the Virgin Islands Code and the
Coastal Zone Management Rules and Regulations.**

1. Name, Mailing address and telephone number of applicant.

*L.S.J, LLC
c/o 6100 Red Hook Quarter, Suite B-3, St Thomas VI*

2. Name, title, mailing address and telephone number of the owner of the property.

same A Little St James Island

3. Location of activity. Plot No. § Estate _____ Island _____

4. Summary of proposed activity. Include all incidental improvements such as utilities, roads, etc.
(Use additional sheet if necessary). *See attached summary*

This modification if approved is subject to the conditions of
Permit No. _____ that are not superseded by this modification.

Signature of applicant Date Signature of Property Owner Date

The Commissioner reviewed the requested amendment / modification and
determined that it will / will not significantly modify the scope, nature or
characteristics of the proposed development.

Inspector Date

Application Approved ()

Commissioner Date

Application Disapproved ()