

## **RECEIPT OF PAYMENT**

**Receipt Number:** 20230161 March 07, 2023 **Receipt Date:** Date Paid: March 07, 2023

**Full Amount:** \$900.00

**Payment Details: Payment Method Amount Tendered Check Number** 

Debit Card \$900.00

**Amount Tendered:** \$900.00 Change / Overage: \$0.00

**Contact:** Elizabeth Herbert, Phone: (970) 819-9992

**FEE DETAILS** 

**Fee Description Reference Number Amount Owing Amount Paid** Site Plan Review Fee

\$900.00 PL20230018 \$900.00