

S-87395
BRUCE CLEETON
CITY OF HARRISBURG
354 SMITH ST
PO BOX 378
HARRISBURG OR 97446

Application No. S- 87395

Permit No. _____

Certificate No. _____

Date

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

Volume | Page

FEES PAID

Date	Amount	Receipt No.
2-17-09	900.00	95640
	Cert. Fee	

FEES REFUNDED

Date	Amount	Receipt No.

2-17-2009
LINN WM# 2

ED FILES

ASSIGNMENTS

Date

To Whom

Address

OPMENT _____ Date

etion _____

led to _____

Proof received _____

sed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____