

Application No. R 87446 ACT FEES PAID

Permit No. _____

Certificate No. _____

| Date | Amount | Receipt No. |
|---------|--------|-------------|
| 4.23.09 | 140.00 | 96231 |
| | | |
| | | |
| | | |
| | | |

Date

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

Volume | Page

FEES REFUNDED

| Date | Amount | Receipt No. |
|------|--------|-------------|
| | | |
| | | |
| | | |
| | | |

Cert. Fee

4-23-2009

OLFEK WM# 20

ED FILES

ASSIGNMENTS

Date

To Whom

Address

OPMENT _____ Date _____

pletion _____

ded to _____

Proof received _____

used Cert. Mailed _____

REMARKS

MAP LOCATION _____