

Application No. G16925

Permit No. \_\_\_\_\_

Certificate No. \_\_\_\_\_

Date

DENIED \_\_\_\_\_

MISFILED \_\_\_\_\_

WITHDRAWN \_\_\_\_\_

CANCELLED \_\_\_\_\_

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**FEES PAID**

Date	Amount	Receipt No.
9-10-07	1000.00	89579
	Cert. Fee	

**FEES REFUNDED**

Date	Amount	Receipt No.

FILE G-16925  
ATTN: RALPH LANE JR  
ODELL SANITARY DISTRICT  
PO BOX 28  
ODELL OR 97044

SENT 10, 2007  
HOOD RIVER WM# \_\_\_\_\_

**ED FILES**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ASSIGNMENTS**

Date	To Whom	Address

DEVELOPMENT \_\_\_\_\_ Date \_\_\_\_\_  
Completion \_\_\_\_\_  
Added to \_\_\_\_\_  
Proof received \_\_\_\_\_  
Signed Cert. Mailed \_\_\_\_\_

**REMARKS** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MAP LOCATION** \_\_\_\_\_

9-10-2007