

R-87599
MONTE HILL
2702 ELKHEAD RD
YONCALLA OR 97499

Application No. R 87599 ALT FEES PAID

Permit No. _____

Certificate No. _____

Date	Amount	Receipt No.
5-5-10	\$800 ⁰⁰	99885
	Cert. Fee	

Date

DENIED _____

MISFILED _____

Volume | Page

WITHDRAWN _____

CANCELLED _____

FEES REFUNDED

Date	Amount	Receipt No.

5-5-2010

Doug WM# 15

ED FILES

ASSIGNMENTS

Date

To Whom

Address

OPMENT

Date

letion _____

ded to _____

Proof received _____

sed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____