Application No. R 87617 ALT

Permit No.

Certificate No.

Name — Gabriel Newbold
By —
Address PO Box 761
Gaston, OR 97119

Priority 6-14-2010

County WASH. WM# 18

FEES PAID

Date	Amount	Receipt No.
6-14-10	$425.00	100236
	Cert. Fee	

	Date	Volume	Page
DENIED			
MISFILED			
WITHDRAWN			
CANCELLED			

FEES REFUNDED

Date	Amount	Receipt No.

RELATED FILES

DEVELOPMENT Date

Completion

Extended to

Final Proof received

Proposed Cert. Mailed

ASSIGNMENTS

Date	To Whom	Address

REMARKS

MAP LOCATION

Rev. 04/03

no checkout

SMEAD