Application No. G17485

Permit No. _____

Certificate No. _____

G-17485

Name _ JAMES FARMER, MARGARET M FARMER & CHARLES WARREN FARMER

By _ PO BOX 1585

Address NYSSA OR 97913

Priority AUGUST 24, 2011

County MALHEUR WM# 9

FEES PAID

Date	Amount	Receipt No.
8-24-11	$ 1900.00	103731
	Cert. Fee	

FEES REFUNDED

Date	Amount	Receipt No.

Date

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

Volume	Page

RELATED FILES

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ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT Date

Completion _____

Extended to _____

_____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS _____

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MAP LOCATION _____

Rev. 04/03

NS 8/25/2011