

Name **Klamath County School District**
 By **10501 Washburn Way**
 Address **Klamath Falls, OR 97603**

Priority 10-19-2011
 County KLAM WM# 17

RELATED FILES
G 17496

DEVELOPMENT Date

Completion _____
 Extended to _____

 Final Proof received _____
 Proposed Cert. Mailed _____

Application No. **G17497**
Permit No.
Certificate No.

Date

DENIED _____
MISFILED _____
WITHDRAWN _____
CANCELLED _____

Volume	Page

FEES PAID		
Date	Amount	Receipt No.
10-19-11	\$1650 ⁰⁰	104274
	Cert. Fee	

FEES REFUNDED		
Date	Amount	Receipt No.

ASSIGNMENTS

Date	To Whom	Address

REMARKS _____

'IR' DUE DATE:
 Dec 03, 2011

MAP LOCATION _____