

Application No. **R-87776 - ACT**

FEES PAID

Date	Amount	Receipt No.
1-11-12	\$725 ⁰⁰	104842
	Cert. Fee	

Name

By R-87776
David Randall
Addre 1030 W Harvard PMB 5012
Roseburg OR 97471

Permit No. _____

Certificate No. _____

Date

DENIED _____

MISFILED _____

Volume | Page

WITHDRAWN _____

CANCELLED _____

FEES REFUNDED

Date	Amount	Receipt No.

Priority _____

County _____ WM# _____

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____

LS 1/12/12