

Application No. **R- 87777 - ALT**

FEES PAID

Date	Amount	Receipt No.
1-11-12	\$725 ⁰⁰	104843
	Cert. Fee	

FEES REFUNDED

Date	Amount	Receipt No.

Name R-87777
By David Randall
Address 1030 W Harvard PMB 5012
Roseburg OR 97471

Permit No. _____
Certificate No. _____

Date

DENIED _____

MISFILED _____

Volume Page

WITHDRAWN _____

CANCELLED _____

Priority _____

County _____ WM# _____

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____

Rev. 04/03

NR 1/12/2012