

Application No. **R- 87838** **ALT**

FEES PAID

Date	Amount	Receipt No.
9-7-12	925 ⁰⁰	106756
	Cert. Fee	

Name S-87838
 CHAD DAN HAFNER
 By PO BOX 53
 Address LYONS OR 97358

Permit No. _____
 Certificate No. _____

Date

DENIED _____
MISFILED _____
WITHDRAWN _____
CANCELLED _____

Volume Page

FEES REFUNDED

Date	Amount	Receipt No.

Priority SEPTEMBER 7, 2012
 County MARION WM# 16

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____
 Extended to _____

 Final Proof received _____
 Proposed Cert. Mailed _____

REMARKS

MAP LOCATION