

Name G-17957
By WADE COX
Address 33927 BERRY DR NE
ALBANY OR 97322

Application No. G17597
Permit No. _____
Certificate No. _____

FEES PAID

Date	Amount	Receipt No.
<u>11-16-12</u>	<u>1250⁰⁰</u>	<u>107361</u>
	Cert. Fee	

Date

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

Volume | Page

FEES REFUNDED

Date	Amount	Receipt No.

Priority November 16, 2012
County LINN WM# 2

RELATED FILES**ASSIGNMENTS**

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____