

Application No. G17605

Permit No. _____

Certificate No. _____

FEES PAID

Date	Amount	Receipt No.
12-12-12	1650.00	107555
	Cert. Fee	

FEES REFUNDED

Date	Amount	Receipt No.

Name G-17605
 By LYN AND TRACY ROBERTSON
 Address 25906 LLEWELLYN RD
CORVALLIS OR 97333

Date

DENIED _____

MISFILED _____

Volume Page

WITHDRAWN _____

CANCELLED _____

Priority DECEMBER 12, 2012
 County BENTON WM# 16

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____
 Extended to _____

 Final Proof received _____
 Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____