

Application No. **S-87859**

Permit No. \_\_\_\_\_

Certificate No. \_\_\_\_\_

**FEES PAID**

Date	Amount	Receipt No.
1-16-13	850.00	107798
	Cert. Fee	

**FEES REFUNDED**

Date	Amount	Receipt No.

Date

**DENIED** \_\_\_\_\_

**MISFILED** \_\_\_\_\_

**WITHDRAWN** \_\_\_\_\_

**CANCELLED** \_\_\_\_\_

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\_\_\_\_\_ | \_\_\_\_\_

\_\_\_\_\_ | \_\_\_\_\_

Name S-87859  
By BECKY MARSHALL  
Address 936 SE SHARON AVE  
ROSEBURG OR 97470

Priority JANUARY 16, 2013

County DOUGLAS WM# 15

**RELATED FILES**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ASSIGNMENTS**

Date	To Whom	Address

**DEVELOPMENT**

Date

Completion \_\_\_\_\_

Extended to \_\_\_\_\_

Final Proof received \_\_\_\_\_

Proposed Cert. Mailed \_\_\_\_\_

**REMARKS** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MAP LOCATION** \_\_\_\_\_