

Application No. **R- 87877**

Permit No. _____

Certificate No. _____

Date _____

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

Volume _____ Page _____

FEES PAID

Date	Amount	Receipt No.
3-7-13	1431.50	108246
	Cert. Fee	

FEES REFUNDED

Date	Amount	Receipt No.

Name R-87877
By CITY OF LYONS
Address ATTN MARY MITCHELL- CITY MANAGER
449 5TH ST
LYONS OR 97358

Priority MARCH 7, 2013

County LINN WM# 16

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS

MAP LOCATION _____