

Application No. G17633

FEEES PAID

Date	Amount	Receipt No.
3-6-13	2,000 ⁰⁰	108244
	Cert. Fee	

Name - G-17633
 By - GRACE DINSDALE
 Address - PO BOX 1130
 CORNELIUS OR 97113

Permit No. _____
 Certificate No. _____

Date

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

Volume Page

FEEES REFUNDED

Date	Amount	Receipt No.

Priority MARCH 6, 2013

County WASHINGTON WM# 18

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____