

Name \_\_\_\_\_ Marcia Fitch  
 By \_\_\_\_\_ 239 Hamilton Road  
 Address \_\_\_\_\_ Jacksonville, OR 97530

S-87882

Application No. **87882**  
 Permit No. \_\_\_\_\_  
 Certificate No. \_\_\_\_\_

**FEES PAID**

Date	Amount	Receipt No.
84-1-13	\$1307 <sup>00</sup>	108410
	Cert. Fee	

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

Date

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

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

**WITHDRAWN** \_\_\_\_\_

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

Volume | Page

**FEES REFUNDED**

Date	Amount	Receipt No.

Priority APRIL 1, 2013  
 County JACKSON WM# 13

**RELATED FILES**

LL-1457  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ASSIGNMENTS**

Date	To Whom	Address

**DEVELOPMENT**

Date

Completion \_\_\_\_\_  
 Extended to \_\_\_\_\_  
 \_\_\_\_\_  
 Final Proof received \_\_\_\_\_  
 Proposed Cert. Mailed \_\_\_\_\_

**REMARKS**

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

**MAP LOCATION**