Name S-87900 By CHAD HAFNER OR DAN HAFNER PO BOX 53 LYONS OR 97358		Application No. Permit No. Certificate No.		-	ES PAID Date 5-17-13	# 1025.00	Receipt No.	
		DENIED	Date	- Volume Pag	FF	 ES REFUN	Cert. Fee	
Priority May 17, 7013 County Marcon RELATED FILES	WM#	CANCELLED				Date	Amount	Receipt No.
		ASSIGNMENTS						
DEVELOPMENT Completion Extended to		Date	To Whom				Address	
Final Proof received Proposed Cert. Mailed								

REMARKS					

MAP LOCATION _