

Name _____
By _____
Address _____

Priority _____
County _____ WM# _____

Application No. G16775
Permit No. _____
Certificate No. _____

FEES PAID

Date	Amount	Receipt No.
1-3-07	500.00	85795
	Cert. Fee	

_____ Date _____
DENIED _____
MISFILED _____
WITHDRAWN _____
CANCELLED _____

Volume	Page

FEES REFUNDED

Date	Amount	Receipt No.

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____
Extended to _____

Final Proof received _____
Proposed Cert. Mailed _____

REMARKS

MAP LOCATION
