

Name _ City of Jacksonville S-88088
 By - Attention: Jeff Alvis
 Address: PO Box 7
 Jacksonville, OR 97530

Application No. S-88088
 Permit No. _____
 Certificate No. _____

FEES PAID

Date	Amount	Receipt No.
5-21-15	1,680. ⁰⁰	115946
	Cert. Fee	

Date

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

Volume | Page

FEES REFUNDED

Date	Amount	Receipt No.

Priority MAY 21, 2015
 County JACKSON WM# 13

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS

MAP LOCATION

KS 5/21/2015