Name		Application No Permit No Certificate No	•		FEES PAID Date 6-22-15	Amount 830.	Receipt No. NG324
By Scott Gibson I Address 10149 Table Rock Road Central Point, OR 97502	R-88101	DENIED	Date				
		DENIED MISFILED		Volume Page	FEES REFUND	Cert. Fee ED Amount	Receipt No.
Priority <u>Tune 22, 2015</u> County <u>Tackson</u> WM		WITHDRAWN CANCELLED					Keceipt No.
RELATED FILES							I
	AS	SIGNMENTS					
		Date	To Whom			Address	
DEVELOPMENT Date			·····		<u> </u>		
Completion	<u> </u>				······		
Extended to	. <u></u>					_,	<u> </u>
Final Proof received			······································		······································		
Proposed Cert. Mailed	<u></u>	I	<u></u>	I	· · · · ·		
				REMAR	2KS		

HS 6/23/2015

MAP LOCATION _____

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