

R-88178

Application No. 2-88178 ALT

Permit No. _____

Certificate No. _____

FEES PAID

Date	Amount	Receipt No.
2-5-16	380.00	118852
	Cert. Fee	

Date

DENIED _____

MISFILED _____

Volume | Page

WITHDRAWN _____

CANCELLED _____

FEES REFUNDED

Date	Amount	Receipt No.

Name _____ White Oak Farm and Ed. Center
 By _____ Attn: Taylor Starr
 Address _____ PO Box 450
 _____ Williams, OR 97544

Priority FEBRUARY 11, 2016County JOSEPHINE WM# 14**RELATED FILES**

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____