

Name Wayne Kaaen R-88219
 P.O. Box 402
 By Halfway, OR 97834
 Address _____

Application No. R-88219 ALT
 Permit No. _____
 Certificate No. _____

FEES PAID

Date	Amount	Receipt No.
4-29-16	\$410.00	119650
	Cert. Fee	

Priority April 29, 2016
 County Baker WM# 9

Date _____
DENIED _____
MISFILED _____ Volume Page
WITHDRAWN _____
CANCELLED _____

FEES REFUNDED

Date	Amount	Receipt No.

RELATED FILES

ASSIGNMENTS

DEVELOPMENT

Date

Completion _____
 Extended to _____

 Final Proof received _____
 Proposed Cert. Mailed _____

Date	To Whom	Address

REMARKS

MAP LOCATION

US 5/4/2016