

Name Kimberly Trehwella G-18324
PO Box 1049
By Estacada, OR 97023
Address _____

Priority June 27, 2016
County Clackamas WM# 20

RELATED FILES

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

Application No. **G- 18324**

Permit No. _____

Certificate No. _____

Date

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

Volume Page

FEES PAID

Date	Amount	Receipt No.
6-27-16	\$1,000.00	120301
6-27-16	\$900.00	120302
	Cert. Fee	

FEES REFUNDED

Date	Amount	Receipt No.

ASSIGNMENTS

Date	To Whom	Address

REMARKS _____

MAP LOCATION _____

KS 6/29/2016