

Name Shad Vaughan G-18353
By 9500 Butte Falls Hwy
Eagle Point, OR 97524

Address _____

Priority _____

County _____ WM# _____

RELATED FILES

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

Application No. **G-18353**

Permit No. _____

Certificate No. _____

Date

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

Volume | Page

FEES PAID

Date	Amount	Receipt No.
8-1-16	\$2,230.00	120755
	Cert. Fee	

FEES REFUNDED

Date	Amount	Receipt No.

ASSIGNMENTS

Date	To Whom	Address

REMARKS _____

MAP LOCATION _____