

Application No. S88350

FEES PAID

Date	Amount	Receipt No.
1/6/17	2,650.00	122281
	Cert. Fee	

FEES REFUNDED

Date	Amount	Receipt No.

Name Scott Setniker or David Setniker
 By PO Box 338 S-88350
 Address Independence, OR 97351

Permit No. _____
 Certificate No. _____

Norma R Setniker Revocable Trust
and Frank Setniker Family Trust
4450 Independence Hwy
Independence, OR 97351 S-88350

Date _____
DENIED _____
MISFILED _____
WITHDRAWN _____
CANCELLED _____

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Priority January 6, 2017

County Polk WM# 16

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____

no balance