

Name _____
By _____ Thomas Postlewait
Address _____ 28923 S Barlow Rd
Canby, OR 97013

Application No. **G-18444**
Permit No. _____
Certificate No. _____

FEES PAID

Date	Amount	Receipt No.
1/25/17	1900.00	122455
	Cert. Fee	

Date

DENIED

MISFILED

WITHDRAWN

CANCELLED

Volume Page

FEES REFUNDED

Date	Amount	Receipt No.

Priority JANUARY 25, 2017
County Clatsop WM# 20

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS

MAP LOCATION

JS 1/25/2017