

Application No. R 88395

**FEES PAID**

Permit No. \_\_\_\_\_

Date	Amount	Receipt No.
4-24-17	\$1400 <sup>00</sup>	123248

Certificate No. \_\_\_\_\_

Date

DENIED \_\_\_\_\_

MISFILED \_\_\_\_\_

Volume | Page

WITHDRAWN \_\_\_\_\_

CANCELLED \_\_\_\_\_

**FEES REFUNDED**

Date	Amount	Receipt No.

Cert. Fee

Name Lee Bischoff R-88395  
 By \_\_\_\_\_  
 Address 7695 Blanchard Road  
Sheridan, OR 97378

Priority APRIL 24, 2017

County Polk WM# 16

**RELATED FILES**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ASSIGNMENTS**

Date	To Whom	Address

**DEVELOPMENT**

Date

Completion \_\_\_\_\_

Extended to \_\_\_\_\_

Final Proof received \_\_\_\_\_

Proposed Cert. Mailed \_\_\_\_\_

**REMARKS** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
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 \_\_\_\_\_  
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MAP LOCATION \_\_\_\_\_

uc ub/2017