

Application No. S 88396

FEES PAID

Date	Amount	Receipt No.
4-24-17	\$1050 ⁰⁰	123249
	Cert. Fee	

Name Lee Bischoff S-88396
 By 7695 Blanchard Road
 Address Sheridan, OR 97378

Permit No. _____
Certificate No. _____

Date

DENIED _____
MISFILED _____
WITHDRAWN _____
CANCELLED _____

Volume | Page

FEES REFUNDED

Date	Amount	Receipt No.

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

MAP LOCATION
