

Application No. **G-18529**

FEEES PAID

Date	Amount	Receipt No.
6-21-17	2500 ⁰⁰	123761
	Cert. Fee	

FEEES REFUNDED

Date	Amount	Receipt No.

Name _____
By _____
Address _____
Stephen E. Poppe
PO Box 310
Grants Pass, OR 97528-0024
G-18529

Permit No. _____
Certificate No. _____

Date

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

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Priority JUNE 21, 2017

County JOSEPHINE WM# 14

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____