

Application No. R-88569
Permit No. _____
Certificate No. _____

FEES PAID

Date	Amount	Receipt No.
3-23-18	965.00	126195
	Cert. Fee	

FEES REFUNDED

Date	Amount	Receipt No.

Name _____
By _____
Address _____
Arthur and Susan Kilander R-88569
33100 SE Sofich Lane
Eagle Creek, OR 97022

Date _____
DENIED _____
MISFILED _____
WITHDRAWN _____
CANCELLED _____

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Priority MARCH 23, 2018
County GRANT WM# 4

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____
Extended to _____
Final Proof received _____
Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____