

Name G-18789
Wayne and Amanda Staehely
By 29490 S. Jackson Rd.
Canby, OR. 97013
Address _____

Priority 2-8-19
County CLAC WM# 16

RELATED FILES

DEVELOPMENT

Date

Completion _____
Extended to _____

Final Proof received _____
Proposed Cert. Mailed _____

Application No. **G- 18789**

Permit No. _____

Certificate No. Replacement Application For App G-18515

Date

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

Volume Page

FEES PAID

Date	Amount	Receipt No.
<u>2/8/19</u>	<u>\$1,320.00</u>	<u>129119</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	Cert. Fee	_____

FEES REFUNDED

Date	Amount	Receipt No.
_____	_____	_____
_____	_____	_____
_____	_____	_____

ASSIGNMENTS

Date

To Whom

Address

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

REMARKS

MAP LOCATION

Mfb 2-20-19