Name
By
Add

G-18829
Paul and Donna Lipscomb
PO Box 579
Sisters OR 97759

Priority 5-24-19

County MARI WM# 16

RELATED FILES

Application No. G- 18829

Permit No. _____

Certificate No. _____

	Date	Volume	Page
DENIED			
MISFILED			
WITHDRAWN			
CANCELLED			

FEES PAID

Date	Amount	Receipt No.
5/24/19	2,210.00	129853
	Cert. Fee	

FEES REFUNDED

Date	Amount	Receipt No.

DEVELOPMENT Date

Completion _____

Extended to _____

_____

Final Proof received _____

Proposed Cert. Mailed _____

ASSIGNMENTS

Date	To Whom	Address

REMARKS _____

MAP LOCATION _____

MFB 5-31-19

Rev. 04/03