Application No. S 88719 E-2

Permit No. _____

Certificate No. _____

Name _____

By _____

Address _____

Priority 7-17-19

County JACK WM# 13

FEES PAID

Date	Amount	Receipt No.
7/15/19	625.00	130246
	Cert. Fee	

FEES REFUNDED

Date	Amount	Receipt No.

	Date	Volume	Page
DENIED			
MISFILED			
WITHDRAWN			
CANCELLED			

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____