

Application No. **G-18841**

G-18841  
Name Clayton Strasser  
By 66986 Gist Road  
Add Bend OR 97703

Permit No. \_\_\_\_\_  
Certificate No. \_\_\_\_\_

**FEES PAID**

Date	Amount	Receipt No.
7/17/19	2210.00	130275

Date

DENIED \_\_\_\_\_

MISFILED \_\_\_\_\_

Volume Page

WITHDRAWN \_\_\_\_\_

CANCELLED \_\_\_\_\_

**FEES REFUNDED**

Date	Amount	Receipt No.

Priority 7-17-19

County DESC WM# 11

**RELATED FILES**

**ASSIGNMENTS**

Date	To Whom	Address

**DEVELOPMENT**

Date

Completion \_\_\_\_\_

Extended to \_\_\_\_\_

Final Proof received \_\_\_\_\_

Proposed Cert. Mailed \_\_\_\_\_

**REMARKS** \_\_\_\_\_

**MAP LOCATION** \_\_\_\_\_

*MB* 7-23-19