

Application No. S 88743

FEES PAID

Date	Amount	Receipt No.
9-12-19	\$1,280.00	130803

Name	S-88743
By	Adam Ryan
Address	38001 Alexander Road Philomath, OR 97370

Permit No. _____

Certificate No. _____

Date _____

DENIED _____

MISFILED _____

WITHDRAWN _____

CANCELLED _____

Volume _____

Page _____

FEES REFUNDED

Date	Amount	Receipt No.

Cert. Fee _____

Priority 9-19-19

County BENT WM# 16

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date _____

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS _____

MAP LOCATION _____

11889-29-19