

Application No. R 88849 ALT

FEES PAID

Date	Amount	Receipt No.
7-17-2020	\$965. ⁰⁰	133072
Cert. Fee		

Name R-88849
 By Bente Kongsore
 Address P.O. Box 459
Creswell, OR 97426

Permit No. _____

Certificate No. _____

Date

DENIED _____

MISFILED _____

Volume | Page

WITHDRAWN _____

CANCELLED _____

FEES REFUNDED

Date	Amount	Receipt No.

Priority 7-17-2020

County Lane WM# Z

RELATED FILES

ASSIGNMENTS

Date	To Whom	Address

DEVELOPMENT

Date

Completion _____

Extended to _____

Final Proof received _____

Proposed Cert. Mailed _____

REMARKS

