

PROGRESS SHEET - APPLICATION FOR CHANGE/TRANSFER

SUBJECT TO REAL ESTATE EXCISE TAX? YES NO

NAME: **Spencer-Livingston, a Partnership**

George T. Livingston
42031 Quail Run North
Davenport, WA 99122

(509) 721-0025

Copies scanned & e-mailed to Department of Revenue:

Date: _____

Initial: _____

Chg. Application ROE/ROD Assignment

*Superseding
Permit issued
7-31-2013
SEPA*

ASSIGNED (SEE BACK OF PAGE)

APP. NO.	PERMIT NO. G3-28837	CERT. NO.	CERT. OF CHANGE NO(S)
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LINCOLN COUNTY

WRIA

53

WRTS No. **CG3-28837@2**

ID No. **4602764**

*\$50.00 overpayment - use towards any future fees used KT 4-2-09 (date)
Initial*

PURPOSE OF APPLICATION: **Add a POW**

Date Application received: **3-16-2009**

Date fee received: **3-16-2009**

Amount: **\$50.00**

Statement of additional exam sent: **03-25-2009**

Date fee received: **03-31-2009**

Amount: **\$277.78**

Returned for completion or correction:

Received:

Application mapped by: R Darnell date: 4/13/09

SPOTTED

PUBLICATION:

Newspaper: **Davenport Times**

OK'd by: KT

Date Notice Sent 4-15-2009

Date Affidavit received: 6-1-09

Time expires: 5-30-09

Checked by: KT

Date: 6-2-09

Protests: _____

Fee rcvd _____

FIELD EXAMINATION REQUIRED:

YES (X)

NO (A) *KB 11/10/09*

Examination by: K. Brown date:

ROE map checked by: _____ date: _____

BC due: _____ BC rcvd: _____ ext: _____

CC due: _____ CC rcvd: _____ ext: _____

PA due: _____ PA rcvd: _____ ext: _____

PA FIELD EXAMINATION REQUIRED - DATE: _____ BY: _____

Date OK'd for CHANGE/TRANSFER: 6-20-2013 By: K. Brown

Chg-ROE map checked by: _____ Date: _____

*Statement of Fee Sent: _____ Fee Received: _____

*Cert. Of Change ONLY

Date CHANGE ROE ISSUED: _____ No. _____

Change/Transfer Application to be processed by County Water Conservancy Board

ROD received:	45 day review period ends:	Review Period Extended to:	Ecy Decision Mailed:
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Date mailed to interested parties:

State DOH 4/15/09 County DOH 4/15/09 Spokane Tribe 4/15/09

ASSIGNMENT INFO:

SUBJECT TO REAL ESTATE EXCISE TAX

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue

Date: _____

Initial: _____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue

Date: _____

Initial: _____

Assignment received: _____

Assignment approved: _____

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Submitted to Department of Revenue

Date: _____

Initial: _____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue

Date: _____

Initial: _____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

Mailed assignee copy of current App/ROE date: _____

Submitted to Department of Revenue

Date: _____

Initial: _____