

PROGRESS SHEET – APPLICATION FOR CHANGE/TRANSFER

NAME: **City of Othello**
500 East Main St.
Othello, WA 99344

PHONE: 509-488-5686
 EMAIL: esheldon@othellova.gov

ASSIGNED (SEE BACK OF PAGE)

APP. NO.	PERMIT NO. G3-25933	CERT. NO.	CERT. OF CHANGE NO(S)
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ADAMS COUNTY
ADAM-12-04

WRIA

From 41
To 36

WRTS No. **CG3-25933@1**
 ID No. **5404251**

Special Area: **508-14**

Superseding Doc. ID No. **5884943**

PURPOSE OF APPLICATION: Change the point of withdrawal

Date Application received: _____
 Statement of additional fees: _____
 Returned for completion of: _____
 Application mapped by: _____

PUBLICATION:

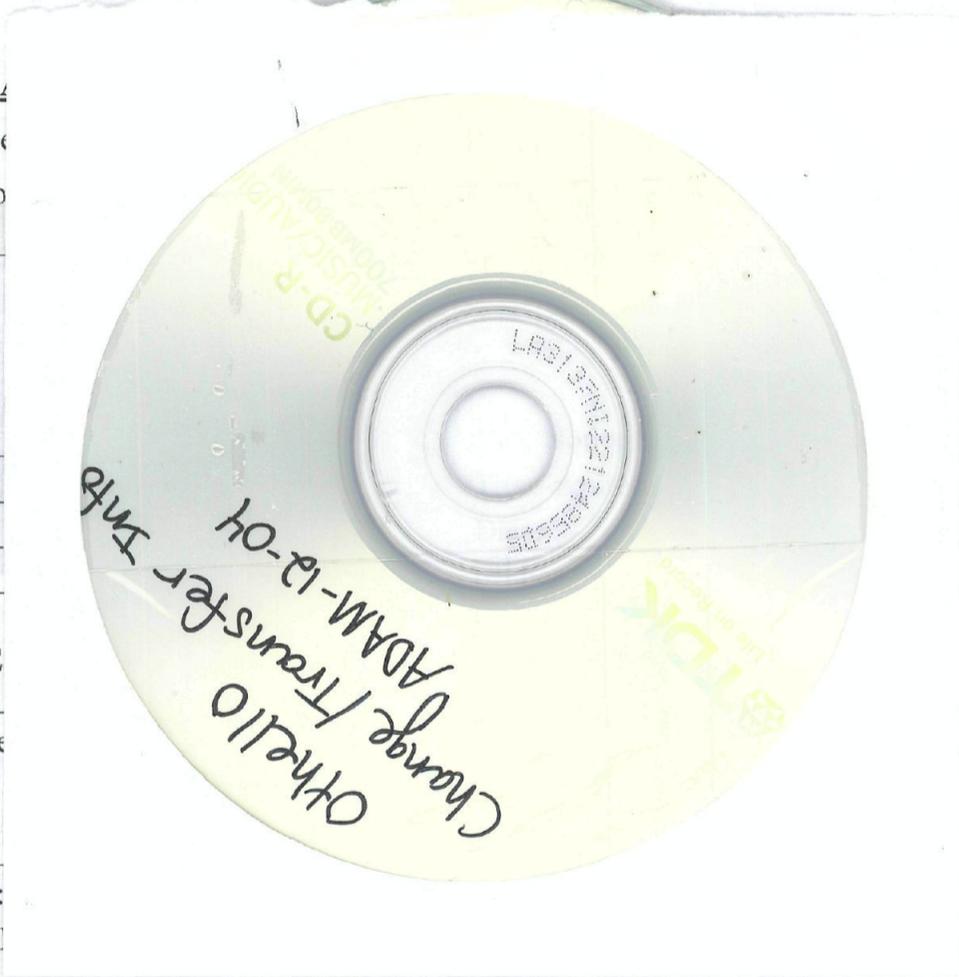
Newspaper: **ACWCB**

OK'd by: _____
 Date Affidavit received: _____
 Checked by: _____
 Protests: _____

SEPA REQUIRED **YE**

Checklist requested by: _____
 Checked by: _____

FIELD Examination by: _____
 ROE map checked by: _____
 DATE CHANGE ROE ISSUED: _____



DEVELOPMENT SCHEDULE:

BC due: _____	BC revd: _____	ext: _____
CC due: _____	CC revd: _____	ext: _____
PA due: _____	PA revd: _____	ext: _____

PA FIELD EXAMINATION REQUIRED – DATE: _____ **BY:** _____

DATE SUPERSEDING DOCUMENT ISSUED: **9-5-2013**

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

ROD received: 6-4-2013	45 day review period ends: 7-19-2013	Review Period Extended to:	Ecy Decision Mailed: 7-18-2013
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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: _____

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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: _____