

**STATE OF WASHINGTON
DEPARTMENT OF ECOLOGY**

PROGRESS SHEET

SURFACE WATER

GROUND WATER

NAME City of Colville	TELEPHONE NO. (509) 684-2244
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ADDRESS 170 S. Oak	CITY Colville	STATE WA	ZIP CODE 99114
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ASSIGNED TO	TELEPHONE NO.	DATE ASSIGNED
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ADDRESS	CITY	STATE	ZIP CODE
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APPLICATION NO. G3-30289	PERMIT NO. <i>2145908</i>	CERTIFICATE NO.
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DATE AMENDED	DATE CANCELLED	W.R.I.A. 59
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APPLICATION

DATE APPLICATION RECEIVED May 26, 2000	INITIAL \$10.00 FEE RECEIVED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	DATE FEE RECEIVED May 26, 2000
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STATEMENT OF ADDITIONAL EXAMINATION FEE \$	DATE SENT	DATE RECEIVED
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DATE RETURNED FOR COMPLETION OR CORRECTION	DATE RECEIVED
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TEMPORARY PERMIT

APPROVED BY	DATE ISSUED
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Statesman Examiner	PUBLICATION	S
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APPROVED BY	DATE APPROVED	DATE NOTICE SENT
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PROTESTED BY & DATE

DATE AFFIDAVIT RECEIVED	CHECKED BY	TIME EXPIRED	DATE AMENDED NOTICE SENT	DATE AFFIDAVIT RECEIVED	TIME EXPIRED
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DEPARTMENT OF FISH & GAME REPORT

APPROVED	PROVISO	PROTEST
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EXAMINATION

DATE EXAMINATION MADE	MADE BY	DATE REPORT OF EXAM. WRITTEN	WRITTEN BY	CHECKED BY
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DATE PERMIT FEE REQUESTED	AMOUNT DUE	DATE RECEIVED
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PERMIT

PERMIT APPROVED BY	DATE APPROVED	PERMIT NO.	DATE ISSUED
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BEGINNING OF CONSTRUCTION

DATE NOTICE SENT	DATE FILED	EXTENSION FEE
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EXTENDED TO	EXTENDED TO
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WELL DRILLER'S AND/OR CONSTRUCTION REPORT

DATE SENT	DATE FILED
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COMPLETION OF CONSTRUCTION

DATE NOTICE SENT	DATE FILED	EXTENSION FEE
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EXTENDED TO	EXTENDED TO
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PROOF OF APPROPRIATION

DATE SENT	DATE FILED	EXTENSION FEE	EXTENDED TO
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DATE CERT. FEE REQUESTED	AMOUNT DUE	DATE RECEIVED	DATE APPROVED FOR CERTIFICATE	APPROVED BY
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CERTIFICATION

PROOF EXAM REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	CERTIFICATE NUMBER	DATE ISSUED
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CC: State Health Dept.
Stevens County Health