

STATE OF WASHINGTON  
DEPARTMENT OF ECOLOGY

COMPUTER INPUT

- APPLICATION  
 PERMIT  
 CERTIFICATE  
 OTHER

PROGRESS SHEET

SURFACE WATER       GROUND WATER

NAME <b>Douglas and Cindy Price</b>		TELEPHONE NO. <b>956-5984</b>	
ADDRESS <b>3503 W. Sequim Bay Rd PO Box 83</b>		(CITY) <b>Tenino</b>	(STATE) <b>Washington</b>
ASSIGNED TO <b>Sequim</b>		TELEPHONE NO.	DATE ASSIGNED
ADDRESS		(CITY)	(STATE)
ADDRESS		(CITY)	(STATE)
APPLICATION NO. <b>S 2.28958</b>	PERMIT NO.	CERTIFICATION NO.	
DATE AMENDED	DATE CANCELLED	W.R.I.A. <b>20</b>	
<b>APPLICATION</b>			
DATE APPLICATION RECEIVED <b>11/9/93</b>	INITIAL \$10.00 FEE RECEIVED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	DATE FEE RECEIVED <b>11/9/93</b>	
STATEMENT OF ADDITIONAL EXAMINATION FEES	DATE SENT <b>100<sup>00</sup> Paid</b>	DATE RECEIVED	
DATE RETURNED FOR COMPLETION OR CORRECTION		DATE RECEIVED	
<b>TEMPORARY PERMIT</b>			
APPROVED BY		DATE ISSUED	
<b>PUBLICATION</b>			
APPROVED BY		DATE APPROVED	DATE NOTICE SENT <b>12/13/93</b>
PROTESTED BY AND DATE			
DATE AFFIDAVIT RECEIVED <b>1/27/94</b>	CHECKED BY <i>[Signature]</i>	TIME EXPIRED <b>2/5/94</b>	DATE AMENDED NOTICE SENT
DATE AFFIDAVIT RECEIVED	TIME EXPIRED		DATE AMENDED NOTICE SENT
<b>DEPARTMENT OF GAME AND FISHERIES REPORT</b>			
APPROVED	PROVISO <b>Dow letter - deny?</b>	PROTEST	
<b>EXAMINATION</b>			
DATE EXAMINATION MADE	MADE BY	DATE REPORT OF EXAM. WRITTEN	WRITTEN BY
DATE PERMIT FEE REQUESTED	AMOUNT DUE	DATE RECEIVED	
<b>PERMIT</b>			
PERMIT APPROVED BY	DATE APPROVED	PERMIT NO.	DATE ISSUED
<b>BEGINNING OF CONSTRUCTION</b>			
DATE NOTICE SENT	DATE FILED	EXTENSION FEE	
EXTENDED TO		EXTENDED TO	
<b>WELL DRILLER'S AND/OR CONSTRUCTION REPORT</b>			
DATE SENT	DATE FILED		
<b>COMPLETION OF CONSTRUCTION</b>			
DATE NOTICE SENT	DATE FILED	EXTENSION FEE	
EXTENDED TO		EXTENDED TO	
<b>PROOF OF APPROPRIATION</b>			
DATE SENT	DATE FILED	EXTENSION FEE	EXTENDED TO
DATE CERTIFICATE FEE REQUESTED	AMOUNT DUE	DATE RECEIVED	DATE APPROVED FOR CERTIFICATE
			APPROVED BY
<b>CERTIFICATION</b>			
PROOF EXAM. REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	CERTIFICATE NUMBER		DATE ISSUED

REMARKS **Spot POD on metster when determined**