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Completed Document Details

NATIVE NAME: TCI OF ALABAMA LLC

DOC LOG ID: 32595

CHAZ ID: ALD983167891

CITY: PELL CITY

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Document Types

| Document Type | Primary Type | Discontinued On |
|---------------|--------------|-----------------|
| RHWT | Y | |
| RUOH | N | |

Email Addresses

| Affiliation-ID | Interest Type | Email | Native ID | Native Name |
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Processes

| Document Type | Process | Date | Author | Delete |
|---------------|----------------------|------------|-------------|--------|
| RHWT | Logged | 12/22/2015 | SIMMONS_JLS | ✕ |
| RHWT | Completeness Review | 12/30/2015 | HORLICK_S | ✕ |
| RHWT | Ready for Data Entry | 12/30/2015 | HORLICK_S | ✕ |
| RHWT | Data Entry Completed | 12/31/2015 | OUTLEY_D | ✕ |
| RHWT | Final Review | 01/04/2016 | HORLICK_S | ✕ |
| RHWT | Booked into Oculus | 01/04/2016 | THURSBY_K | ✕ |

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|------|--|------------|-------------|---|
| RUOH | Logged | 12/22/2015 | SIMMONS_JLS | ✕ |
| RUOH | Completeness Review | 12/30/2015 | ASHWOOD_J | ✕ |
| RUOH | Ready for Data Entry | 12/30/2015 | ASHWOOD_J | ✕ |
| RUOH | Data Entry Completed | 12/31/2015 | OUTLEY_D | ✕ |
| RUOH | Final Review | 01/04/2016 | ASHWOOD_J | ✕ |
| RUOH | Booked into Oculus  | 01/04/2016 | THURSBY_K | ✕ |

Comments

| Document Type | Date | Comment | Author |
|-----------------|------------|--|-------------|
| General Comment | 12/22/2015 | Insurance form has an original signature. | SIMMONS_JLS |
| RHWT | 12/30/2015 | Updated HWT/UOH Certificate of Liability received. | HORLICK_S |
| RUOH | 12/30/2015 | Received updated original Combined HWT/UO Insurance form - Good. | ASHWOOD_J |

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