

REQUEST FOR ASSIGNMENT

I, (permit holder, applicant) PACIFIC CITY WATER DISTRICT
PO BOX 58 PACIFIC CITY OR 97135 503-965-6636
(mailing address) (city) (state) (zip) (phone)

CHECK ONE

- hereby assign all my interest in and to application/permit

[] - hereby assign all my interest in and to a portion of application/permit (include a map showing portion of application assigned);

[] - hereby assign a portion of my interest in and to the entire application/permit;

Application # G-11754, Permit # G-10798 (WELLS H, 5/86) (4/98)
OR GR Statement # _____, GR Certificate of Registration # _____
as filed in the office of the Water Resources Director, to:

PACIFIC CITY JWSA
P.O. BOX 520
34005 CAPE KIWANDA DRIVE _____
PACIFIC CITY, OR 97135-0520 (name of new owner)

(address) (city) (state) (zip) (phone) 503-965-6636

(Note: If there are other owners of the property described in this Application, Permit of Certificate of Groundwater Registration you must attach a list of their names and addresses to this form.)

I hereby certify that I have notified all other owners of the property described in this Application, Permit or Certificate of Registration of this request for assignment.

Witness my hand this 16 day of Oct, 1998.
applicant (permit holder) [Signature]
(applicant) permit holder [Signature]

DO NOT WRITE IN THIS BOX

STATE OF OREGON,)
) ss
County of Marion.)
I certify that the within was
received by me on the 18th day of
Sept., 1998, at 8 o'clock
A. m., and was recorded in the
Miscellaneous Records, Vol. 8
Page 247
Water Resources Director

The completed assignment must be submitted to the Water Resources Department together with a recording fee of \$25. Additional pages will cost \$5 per page.

WATER RESOURCES DEPARTMENT
158 12TH STREET NE
SALEM, OREGON 97310-0210

RECEIVED
SEP 18 1998
WATER RESOURCES DEPT.
SALEM, OREGON

OK
DSM