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THOUTHON HOD AGGTO	DEO 0 7 1000
REQUEST FOR ASSIG	WATER RESOURCES DEPT.
I, (permit holder, applicant) 1	S K. STAINES SALEM, UNEGUN
64723 Boones Borough Ct. Rend OR 97701 (541) 318-5567 (mailing address) (city) (state) (zip) (phone)	
CHECK ONE	•
□ → Hereby assign all my interest in	and to application/permit;
[] - hereby assign <u>all my interest</u> 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 # <u>G-14744</u> , Permit # <u>G-13529</u> ; OR GR Statement #, GR Certificate of Registration # as filed in the office of the Water Resources Director, to:	
Mike Mulholland (name of new owner)	
(city)	$\frac{R}{(\text{state})} = \frac{(541)}{(504-8675)}$
(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 $28^{\frac{11}{12}}$ day of $\frac{1}{120}$, 1998	
applicant/permit holder	
applicant/permit holder	
DO NOT WRITE IN THIS BOX	
STATE OF OREGON,)	The completed assignment
) ss County of Marion.)	must be submitted to the
I certify that the within was	Water Resources Department together

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A., m., and was recorded in the

Water Resources Director

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with a recording fee of \$25. Additional pages will cost \$5 per page.

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