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Water Resources Director

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APR 1 6 2001 REQUEST FOR ASSIGN	MENT
WATER RESOURCES DEPT. applicant) Denni	o Sial
69420 Crooked Horseshoeld. 51	
(mailing address) (city) (s	tate) (zip) (phone)
CHECK ONE	
🔼 - hereby assign <u>all my interest</u> in	and to application/permit;
[] - hereby assign <u>all my interest</u> application/permit (include a map shows assigned);	
[] - hereby assign a portion of my int application/permit;	
Application # $R-83459/60$, Permi OR GR Statement #, GR Certificat as filed in the office of the Water Res	it # <u>R-12477 / 53408</u> ; e of Registration # ources Director, to:
Melvin Kempf (name of new own 11705 S.W. Lancefield ld. Mcl (address) (city)	er) Linnuille, OR 97128 (state) (zip) (phone)
(Note: If there are other owners of the Application, Permit of Certificate of Granust attach a list of their names and a	property described in this coundwater Registration you
I hereby certify that I have notified property described in this Application Registration of this request for assign Witness my hand this day of	, Permit or Certificate of ment.
applicant/permit holder	
applicant/permit holder	
DO NOT WRITE IN THIS BOX	
STATE OF OREGON, } } ss County of Marion. } certify that the within was received by me on the day of	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, OR 97301-4172