

REQUEST FOR ASSIGNMENT

I, LOREN E. HIBBARD
(Name of Applicant / Permit Holder)

1704 WEST MAIN COTTAGE GROVE, OREGON 97424 541-942-7969
(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;
(You must include a map showing the portion of the application/permit to be assigned.)
- ...hereby assign a portion of my interest in and to the entire application/permit;

Application # 5-71963, Permit # 52858;
-OR-

GR Statement # _____, GR Certificate of Registration # _____

as filed in the office of the Water Resources Director, to:

TERRY L. HIBBARD, PAM THIES, CHARIS WATSON
(Name of New Owner(s))

1704 WEST MAIN ST. COTTAGE GROVE - OR 97424 541-942-7041
(mailing address) (City) (State) (Zip) (Phone #)

OK Assign 1/8/02

NOTE: If there are other owners of the property described in this Application, Permit or Certificate of Ground Water Registration, you must provide a list of all other owners' names and mailing addresses and attach it 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 2 day of JANUARY, 2002.

Applicant/Permit holder Loren E. Hibbard

Applicant/Permit holder _____

DO NOT WRITE IN THIS BOX

STATE OF OREGON,)
) ss
County of Marion.)
I certify that the within was received by me on the 2 day of Jan, 2002 at 8 o'clock Am., and was recorded in the Miscellaneous Records, Vol. 9 Page 95
Water Resources Director

The completed "Request for Assignment" form *must be* submitted to the Department along with the appropriate recording fees:

- ◆ \$25 for the first page, and
 - ◆ \$5 for each additional page.
- [as required by ORS 536.050(1)(d)]

RECEIVED
JAN 04 2002
WATER RESOURCES DEPT
SALEM, OREGON

WATER RESOURCES DEPARTMENT
158 12TH STREET NE
SALEM, OREGON 97301-4172