REQUEST FOR ASSIGNMENT
I, (permit holder, applicant) Oregon Dept. Fish & Wildlife P.O. Box 59 Portland OR 97207 503.872.5299 (mailing address) (city) (state) (zip) (phone)
P.O. Box 59 Portland OR 97207 503.872.5299
(mailing address) (city) (state) (zip) (phone)
CHECK ONE
[6] - hereby assign <u>all my interest</u> in and to application/permit; RECEIVED
[] - hereby assign <u>all my interest</u> in and to a portion of application/permit (include a map showing portion of application) 2000 assigned);
[] - hereby assign a portion of my interest in and to the ester, OREGON application/permit;
Application # R-62601,62602, Permit # R8298, 45974; OR GR Statement #, GR Certificate of Registration # as filed in the office of the Water Resources Director, to:
Metro (AH: Smith & Bybee Lakes Wildlife Area)
(name of new owner) 503.797.15/5
(address) (name of new owner) 503.797.15/5 (city) (state) (zip) (phone)
(address) (city) (state) (zip) (phone)
(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 day of SEPTEMBER, 13 Zooo.
applicant/permit holder Notes 8. Dedge
applicant/permit holder
DO NOT WRITE IN THIS BOX
STATE OF OREGON, } STATE OF OREGON, } County of Marion. } I certify that the within was received by me on the

o'clock

Oct 20 coat

A.m., and was recorded in the Miscellaneous Records, Vol. ____ Page \$200

Water Resources Director

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