

Part 4 of 5 - Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Bill & Ann Langenfeld		PHONE NO. 511493 2087	ADDITIONAL CONTACT NO.
ADDRESS 34530 N. Harney Ln		FAX NO.	
CITY Burns	STATE OR	ZIP 97720	E-MAIL annbill7477@gmail.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Agent Information - The agent is authorized to represent the applicant in all matters relating to this application.

AGENT/BUSINESS NAME		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS		FAX NO.	
CITY	STATE	ZIP	E-MAIL
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this transfer application: and why:

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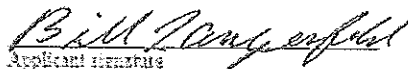
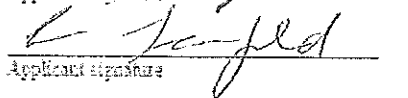


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If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

I (we) affirm that the information contained in this application is true and accurate.

	Bill Langenfeld owner	10-21-15
Applicant signature	Print Name (and Title if applicable)	Date
	Ann Langenfeld	10-21-15
Applicant signature	Print Name (and Title if applicable)	Date

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located?  Yes  No

If NO, include signatures of all landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the water right(s) has been conveyed.

