

Oregon Water Resources Department 725 Summer Street NE, Suite A Salem Oregon 97301 (503) 986-0900 www.wrd.state.or.us

Request for **Assignment**

If for multiple rights, a separate form and fee for each right will be required.

I, Lone Rock Timber Compa	any				
(Name of Applicant /	Permit / Transfer H	older)			
P.O. Box 1127	Roseburg	OR	97470		
(Mailing address)	(City)	(State)	(Zip)	(Phone #)	
hereby assign <u>all my i</u>	i <u>nterest</u> in and to app	lication/p	permit/trans	fer;	
…hereby assign <u>all my i</u> (You must include a r				/permit/transfer; on/permit to be assigned.,)
□hereby assign <u>a portio</u>	<u>n of my interest</u> in a	nd to the	<u>entire</u> appli	cation/permit/transfer;	
Application #	, Permit #		; T	ransfer # <u>6695</u>	
GR Statement #					
as filed in the office of the W	Vater Resources Dire	ector, to:			
Oregon PacificWest Develo	pmentc/o Danny	Cawthon			
(Name of New Owner)					
P.O. Box 1001	Roseburg	OR		7470 (541) 430-6	3908
(Mailing address)	(City)	(2	State) (Z	ip) (Phone #)	Ş
Certificate of		istration,	yo <mark>u m</mark> ust pr	this Application, Permit, rovide a list of all other o n.	
hereby certify that I have n or Certificate of Registration				escribed in this Applicati	owners'
Witness my hand this $\underline{2}$	4 day of	oct.	,20 <u>0</u>	8	
App	licant/Permit holder				
App	licant/Permit holder				
DO NOT WRITE IN	N THIS BOX				
This certifies assignment a Oregon Water Resources I 8:00 a.m. on date of receip Fee receipt #94792 For Director by Jerry Saut	nd record change at Department effective at at Salem, Oregon.		form must	eted "Request for Assign be submitted to the Depa a recording fee of \$50 .	

I

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