| Tean MACTICAL | , | h |
|--|--|-----------------------------|
| / TERRY NOFZIGER | | V |
| (mailing address) Christm | 197641 Olega 9764 | 541-576-235 |
| HECK ONE | | |
| hereby assign all my in | terest in and to application/pe | rmit; |
| | terest in and to a <u>portion</u> of ap showing the portion of the appli | • |
| □hereby assign a portion | of my interest in and to the a | ntire application/permit; |
| Application # TBS/6 | , Permit # | * |
| R Statement # | -OR- , GR Certificate of Registratio | n # |
| | | |
| s filed in the office of the Water F | Resources Director, to: | |
| John E. Boyles | | • |
| Vame of New Owner | | |
| PO BOX 816 BORING | 19 Olleyon 97009 | 503-668-8558 |
| malling address) (Ci | tyl (State) (Zip) | (Phone #) |
| Permit or Certificate o | ers of the property described and Ground Water Registration, armes and mailing addresses | you must provide a list 🛭 🔉 |
| hereby certify that I have notified application, Permit or Certificate o | all other owners of the prope f Registration of this request f | rty described in this |
| Vitness my hand this $\underline{19}$ day | y of Oct. , 20 0: | 2. POBOX SE |
| Applicant/Perm | it holders Lovy 7 | 10-12-02 |
| Applicant/Perm | | |
| DO NOT WRITE IN THIS BOX | The completed "Re | quest for Assignment" |
| | form <i>must be</i> subm | |
| | ♦ \$25 for the fi | ret page, <i>and</i> |

WATER RESOURCES DEPARTMENT 158 12TH STREET NE