

Request for **Assignment**

By Proof of Ownership (If Water Right Holder is Not Available)

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

Eric Pond	4				
(Name of Party Requesti	ng Assignment)				
35711 Helms Dr					(541) 327-7
(Mailing Address)		(City)	(State)	(Zip)	(Phone #)
hereby request assig	nment of application/p	ermit/transfer	/license/	GR Certifica	te of Registration;
Registration; (You r	gnment of a <u>portion</u> of nust include a map sho transfer/license/GR Ce	wing the port	ion of the	е	
have attached proof of own f a land sales contract, a courtenant cannot accept a contract.	irt order or decree, doc	umentation of			
icense # GR	; Permit #_ 5 2	5368	; T	ransfer#	-9506
icense # GR	Statement #	; GR (Certificat	te of Registra	ation #
					E, Goffman,
P.O. Box 1254 (Mailing Address)					
P.O. Box 1254 (Mailing Address) Note: You are required to given or attempted for Failure to submit the	McMinn	(City) e to the Department of your return of your	OR (State) rtment th ot a party our reque	97/28 (Zip) at notice of t to the assign est. (Proof me	(Phone #) the assignment has been ament. ORS 537.220(2) ay include but not be
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P.O. Box 1254 (Mailing Address) Note: You are required to given or attempted for Failure to submit the limited to: a copy of 1) I certify that I am the license or GR Certif 2) I have the legal right	furnish proof acceptable for each identified proping proof will result in the returned certified main the current owner of the ficate of Registration.	(City) e to the Department of your property description of the control of the con	(State) rtment the a party our request Death (cribed in the 1990-310-1990-	97/28 (Zip) at notice of t to the assign est. (Proof me Certificate, of this application of the control of the	(Phone #) the assignment has been ament. ORS 537.220(2) ay include but not be r a court order.) on, Permit, transfer, 0-320-0060.
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This certifies assignment and record change at Oregon Water Resources Department effective 8:00 a.m. on date of receipt at Salem. Oregon. Fee receipt #______ For Director by Jerry Sauter, Program Analyst in Water Rights Division

Agricare N.W. Controller
The completed "Request for Assignment RECEIVED
form must be submitted to the Department
along with the recording fee of \$85.

NOV 1 0 2015

WATER RESOURCES DEPT SALEM, OREGON

KAVANAGH Kerry L

From:

Will McGill <willmcgill.surveying@gmail.com>

Sent:

Thursday, August 04, 2016 2:04 PM

To:

SAUTER Jerry K

Cc:

KAVANAGH Kerry L

Subject:

Draft T-9506

Hi Jerry and Kerry

When I did the assignment for T-9506 I should have shown " $\hbox{Eric Pond}$ for ACMPC Oregon 3, LLC " . By mistake I just listed $\hbox{Eric Pond}.$

So, please show on the certificate as follows:

ACMPC Oregon 3, LLC PO Box 717 Jefferson, OR 97352

Also, Kerry, please check me but on the draft certificate on pages 1 and 2 at the lower left is a reference number of T-950. I think it should be T-9506.

Thanks

Will

Will McGill PLS, CWRE 15333 Pletzer Rd SE Turner, OR 97392 Ph: 503-510-3026



Request for **Assignment**

By Proof of Ownership (If Water Right Holder is Not Available)

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

5711 Helms Dr.	Jefferson	OR	9735.	2 (541) 327 - (Phone #)	78
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)	
hereby request assignment	of application/permit/transfer	r/license/	GR Certifi	cate of Registration;	
Registration; (You must in	t of a <u>portion</u> of application/poclude a map showing the port r/license/GR Certificate of Re	ion of th	e		
ve attached proof of ownership land sales contract, a court order artment cannot accept a copy of	er or decree, documentation o				
olication # \$ 32 148	; Permit # 5 25368	; T	ransfer#	T-9506	
ense # GR Staten	-OR-	Cartifica	to of Pagie	tration #	
aria's Chance Delfore (Name of Holder of Record) (O, Box 1254 (Mailing Address)	McMinnville	OR	97128		
O, Box 1254 (Mailing Address) ote: You are required to furnish given or attempted for each Failure to submit this proo	McMinnville (City)	OR (State) ritment th our reque	97128 (Zip) at notice of to the assignst. (Proof)	(Phone #) f the assignment has be gnment. ORS 537.220(2) may include but not be	en 2)
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DO NOT WRITE IN THIS BOX

This certifies assignment and record change at Oregon Water Resources Department effective 8:00 a.m. on date of receipt at Salem. Oregon. Fee receipt #_ For Director by Jerry Sauter, Program Analyst in Agricare N.W. Controller
The completed "Request for Assignment form must be submitted to the Department" along with the recording fee of \$85.

NOV 1 0 2015

WATER RESOURCES DEPT SALEM, OREGON

L Water Rights Division