



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

# Request for Assignment

RECEIVED

DEC 07 2020

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

I, Legacy Ranches LLC

OWRD

(Name of Applicant / Permit / Transfer Holder / License Holder/GR Certificate of Registration)

PO Box 464 Prineville OR 97754 (541) 419-1027  
 (Mailing Address) (City) (State) (Zip) (Phone #)

- hereby assign all my interest in and to application/permit/transfer/license/GR Certificate of Registration;
- hereby assign all my interest in and to a portion of application/permit/transfer/license/GR Certificate of Registration; (You must include a map showing the portion of the application/permit/transfer/license/GR Certificate of Registration to be assigned.)
- hereby assign a portion of my interest in and to the entire application/permit/transfer/license/GR Certificate of Registration:

Application # \_\_\_\_\_; Permit # \_\_\_\_\_; Transfer # T-10457

-OR-

License # \_\_\_\_\_; GR Statement # \_\_\_\_\_; GR Certificate of Registration # \_\_\_\_\_

As filed in the office of the Water Resources Director, to:

Full Health LLC

(Name of New Owner)

c/o Martha Pagel, Schwabe Williamson & Wyatt, 530 Center St NE, Ste 400, Salem OR 97301 (503) 540-4260  
 (Mailing Address) (City) (State) (Zip) (Phone #)

**Note:** If there are other owners of the property described in the Application, Permit, Transfer, License, or GR Certificate of Registration, you must provide a list of all other owners' names and mailing addresses and attach it to this form.

I hereby certify that I have notified all other owners of the property described in this Application, Permit, Transfer, License, or GR Certificate of Registration of this Request for Assignment

Witness my hand this 17<sup>th</sup> day of May, 2017.

Applicant/Permit Holder [Signature]

Applicant/Permit Holder \_\_\_\_\_

Assign - Approve  
 WSB 12-15-2020

**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 # 134098

For Director by Mary F. Bjork, Program Analyst in Water Rights Division. [Signature]

The completed "Request for Assignment" form *must* be submitted to the Department along with the recording fee of \$85.