

Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301

Salem, Oregon 97301 (503) 986-0900 www.wrd.state.or.us

Request for Assignment

If the Department determines that the application is incomplete, fees have not been paid, or the required documents are not acceptable, the application and all fees submitted will be returned to the applicant.

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

Manager			I TOT WITE	eler SWC	ע					
	urrent Holder of	Record)		,	C'I	0	07070	E 41 469 26	200	
	Hwy 19						97830		990	
Mailing Ad	daress)			((City)	(State)	(Zip)	(Phone #)		
here		interest in an				nit/transfe	r/limited	license/groundwa	ter statement;	
stat	hereby assign all my interest in and to a portion of application/permit/transfer/limited license/groundwater statement; (You must include a map showing the portion of the application/permit/transfer order/limited license/groundwater statement to be assigned. Example, sold a portion of the land authorized under the right)									
	eby assign a porti ement; (example,				applica	tion/pern	nit/transfe	er/limited license/g	groundwater	
	Application	#	; Per	mit #		; T	ransfer#	T-12079	_;	
	Limited	l License #		; Grou	ındwate	r Stateme	nt #	····;		
Steve Ch	arron									
	lew Owner) ory Street			Sa	n Jose	Califo	rnia 951	26 408 893 76	 576	
1225 Em	ory Street				n Jose (City)			26 408.893.76 (Phone #)	576	
Note: If the	there are other ovoundwater statem is form. Write the	nent, you mus e initials (first	t provide a l letters) of y	cribed in the	(City) e applicher own	(State) ation, per ers' name ames at t	(Zip) mit, transes and ma	(Phone #) after order, limited iling addresses and dicated below	license, or d attach it to	
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Fee receipt # 134321

Oregon Water Resources Department effective 8:00 a.m. on date of receipt at Salem, Oregon.

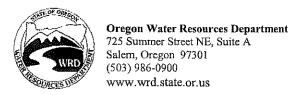
For Director by Mary F. Bjork. Program Analyst in Water Rights Division.

The completed "Request for Assignment"

form must be submitted to the Department

along with the recording fee of \$100.





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OWRD

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	nase Schultz, District Manager for	Wheeler SWCD				
	e of Current Holder of Record)	_				***
	0535 Hwy 19				541.468	***************************************
(Maili	ing Address)	(C	ty) (Stai	te) (Zip)	(Phone #)	!
	hereby assign <u>all my interest</u> in and to <u>the land</u> authors are the land authors.			sfer/limited	l license/ground	lwater statement;
X	hereby assign <u>all my interest</u> in and to a statement; (You must include a map sho license/groundwater statement to be as	wing the portion of	the applica	tion/permit/	transfer order/l	limited
	hereby assign a portion of my interest in statement; (example, adding an addition		plication/p	ermit/transf	fer/limited licen	se/groundwater
	Application #	; Permit #		; Transfer #	<u> </u>	;
	Limited License #	; Ground	water State	ment #		
as file	d in the office of the Water Resources Di	rector, to:				
Steve	e Charron					
(Name	e of New Owner)					
	Emory Street				126 4 08.893	
Maili	ing Address)	(C	ty) (Sta	te) (Zip)	(Phone #,)
	6930 Fairview	Rd Hoi	ister	Californ	ria 95023	(408)892-24
W	groundwater statement, you must prove this form. Write the initials (first letter) I hereby certify that I have notified aller, limited license, or groundwater statement.	ride a list of all other rs) of your first and Il other owners of th	owners' na ast names e property	ames and mat the spot indescribed in	ailing addresses ndicated below	and attach it to
Wi	tness my hand this 12th day (Day) nature of Current Holder of Record	of November (Month	er ,	20 20 (Year)		
Sig	nature of Current Holder of Record	Church Sd	will	,		·
	Failure to provide any of the rec	quired information	will result	in the retu	ırn of your app	olication.
	DO NOT WRITE IN THIS BOX					
		form	must be su	bmitted to	or Assignment's the Department	
		alon	with the re	ecording fee	e of \$100.	