

## **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.

Turne of Currents 11	older of Record)	r Wheeler				
40535 Hwy 1			Fossil,	Oregon	97830	541.468.2990
Mailing Address)			(City)	(State)	(Zip)	(Phone #)
	n <u>all my interest</u> in and to ample, sold all the land au			nit/transfe	er/limited li	cense/groundwater statement
statement; (	n <u>all my interest</u> in and to You must include a map si ndwater statement to be a	howing the po	ortion of the a	pplication	n/permit/tro	ansfer order/limited
	n a portion of my interest example, adding an addition		entire applica	ntion/pern	nit/transfer	/limited license/groundwater
App	blication#	; Permit #	#	; T	ransfer #	T-12079;
	Limited License #		; Groundwate	r Stateme	ent #	;
as filed in the office	of the Water Resources I	Director to:				
Bond Living Tru		onector, to.				
Name of New Own						
41620 Burnt Ra			Mitchell,	Oregor	97750	541.405.4047
Mailing Address)			(City)	(State)	(Zip)	(Phone #)
,			( )			
o ,						
Note: If there are						er order, limited license, or
Note: If there are groundwat	er statement, you must pro	ovide a list of	all other own	ers' name	es and mail	ing addresses and attach it to
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