

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

(503) 986-0900

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.

Name	of Current Holder of Record)				
4(0535 Hwy 19	Foss	il, Orego	n 97830	541.468.2990
(Mailing Address)		(City)	(State)	(Zip)	(Phone #)
	hereby assign all my interest in and (example, sold all the lan	d to the entire application/pord authorized under the right		er/limited li	icense/groundwater statement
	hereby assign all my interest in an statement; (You must include a ma license/groundwater statement to	p showing the portion of the	applicatio	n/permit/tr	ansfer order/limited
	hereby assign a portion of my interstatement; (example, adding an ad		ication/per	mit/transfer	/limited license/groundwater
	Application #	; Permit #	; T	ransfer #	T-12079;
	Limited License #	; Groundwa	iter Stateme	ent #	;
Cyntl Name	d in the office of the Water Resource hia Miani of New Owner)		C-life	:- 0500	071 (45 (492
Cyntl Name 1630	nia Miani of New Owner) Paula Drive	Yuba Cit			
Cyntl Name 1630	nia Miani of New Owner)				3 971.645.6482 (Phone #)
Cyntl Name 1630 Maili	hia Miani of New Owner) Paula Drive ng Address) e: If there are other owners of the progroundwater statement, you must this form. Write the initials (first	Yuba Cit (City) roperty described in the app t provide a list of all other or letters) of your first and las	(State) lication, pe	(Zip) rmit, transf es and mail the spot ind	(Phone #) er order, limited license, or ing addresses and attach it to licated below
(Name 1630 (Mailii	nia Miani of New Owner) Paula Drive ng Address) e: If there are other owners of the progroundwater statement, you must	Yuba Cit (City) roperty described in the app t provide a list of all other or letters) of your first and las	lication, pe	rmit, transfes and mail the spot indscribed in the	(Phone #) er order, limited license, or ing addresses and attach it to licated below
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Oregon Water Resources Department effective 8:00 a.m. on date of receipt at Salem, Oregon. Fee receipt # /34323

For Director by Mary F. Bjork. Program Analyst in Water Rights Division. ___ 381

The completed "Request for Assignment" form must be submitted to the Department along with the recording fee of \$100.

Last updated: September 18, 2017

Request for Assignment

RECEIVED

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