Request for Assignment



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.oregon.gov/owrd

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.

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3300 C Street SW, MS	BB-CR		Cedar Rapids	Iowa		319-355-8063
Aailing Address)			(City)	(State)	(Zip)	(Phone #)
			tire application/per nd authorized und			imited license/groundwate
hereby assign <u>all manager</u> license/groundwate application/permit/ portion of the land	r statement transfer orde	; (<u>You must i</u> er/limited lic	include a map shaw ense/groundwater	ving the p	ortion of th	
hereby assign <u>a por</u> license/groundwate						sfer order/limited
Application #_		; Perm	it # S-25683	; Tran	sfer Order	#_T-13066;
111						
			; Groundwate r, to:	er Statem	ent #	<u>:</u>
s filed in the office of the N David and Kaitlyn Braun Name of New Owner)	Water Resou		r, to:			
s filed in the office of the N David and Kaitlyn Braun	Water Resou			OR (State)	97322	541-979-1200 (Phone #)
David and Kaitlyn Braun Mame of New Owner) 35642 Tennessee Rd Sl Mailing Address) Note: If there are other of or groundwater sta	wners of the atement, you m. Write the at I have not	e property du must provici initials (first	Albany (City) escribed in the app de a list of all other t letters) of your first	OR (State) lication, powners' rest and lass	97322 (Zip) permit, transames and t names at scribed in t	541-979-1200 (Phone #) Insfer order, limited license, mailing addresses and the spot indicated below his application, permit,
David and Kaitlyn Braun Mame of New Owner) B5642 Tennessee Rd Sl Mailing Address) Note: If there are other of or groundwater statach it to this for	wners of the atement, you m. Write the at I have not ense, or gro	e property du must provici initials (first	Albany (City) escribed in the app de a list of all other t letters) of your first owners of the pro-	OR (State) lication, powners' rest and lass	97322 (Zip) Dermit, trannames and thames at scribed in the scribed	541-979-1200 (Phone #) Insfer order, limited license, mailing addresses and the spot indicated below his application, permit,
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The completed "Request for Assignment" form *must* be submitted to the Department along with the recording fee of \$120.

RECEIVED
DEC 14 2022

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