Draft -

REQUEST FOR ASSIGNMENT

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1 Dan Sirk Smith						WATER RESOUR	CES DEP
(Name	e of Applicant / Pen	nit / Transfer Ho	lder)		L	SALEM, OR	EGON
D16 1	IW 3rd D	- Poudle	to OR	gnat	/		
	ng address)	(City)	(State)	(Zip)		(Phone #)	
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hereby a (You mu assigned	assign <u>all my in</u> e st Include a ma p d.)	terest in and to showing the p	o a <u>portion</u> portion of the	of application	n/permit/ / permit t o	transfer; o be	
trans				•			alea ye
Application	n#	, Permit	#	,Tra	ansfer #	9969	, ,
							,
as filed in the office of the Water Resources Director, to: Tox Lot 200							
as filed in th	ne office of the W	/ater Resourc	es Director,	to;		Tali	+-201
11) iDan	re york, Marc	axit U	Cintal	(Lot 200	1.00.	Patricia	Van Da.
× <u>U Waqn</u> (Name	e of New Owner)	Jarx 1 Torry	Unaya	12 State	Hasy	/ MIPIETA	Varioe
1120N-	Terico Lane	Pa State	OR	anas I	F41-21	00-4100	
	ng address)	(City)	(State)	(Zip)	2112/	(Phone #)	
NOTE	if the mean and ath				46:- 0	!!==#!==	Ϋ́
<u>NOTE:</u>	If there are oth						\$ 8
Permit, Transfer or Certificate of Ground Water Registration, you must provide a list of all other owners' names and mailing addresses and							
	attach it to th						7 (2)
I hereby cer	tify that I have n	otified all othe	er owners of	the property	describe	d in this	9/11/2006
	Permit or Certifi						E.C.
Million on a many	المناط المسامل	ما می ملا	TX J	~20 (26-		HILL
witness my	hand this <u>5</u>	day or	and to	—-E-40 <u>-4</u>	CX6 L.		0 1
	Applica	nt/Permit hold	er <u> </u>	m /50	Som	1	`
Applicant/Permit holder							
	пррпоц	o					
DO NOT W	RITE IN THIS	BOX T	he complete	ed "Request	for Assig	nment" form	ł
			nust be subn	nitted to the	Departm	ent along	
		v	vith the appre	opriate recor	ding fees	s:	

- This certifies assignment and record change at Oregon Water Resources Department effective 8:00a.m. on date of receipt at Salem, Oregon.
- Fee receipt #

- For Director by Jerry Sa Water Rights Division

- ♦ \$25 for the first page, and
- ♦ \$5 for <u>each</u> additional page. [as required by ORS 536.050(1)(d)]

WATER RESOURCES DEPARTMENT 725 SUMMER STREET NE, SUITE A **SALEM, OREGON 97301-1271**