Request for Assignment



Oragon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900

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 red	quired.				
, The Capra Compa	MII					
(Name of Current Holder of Record)	- ug		_			
P.O.BOX 2340	Windsor	CA	954	192	707.890	1-8322
(Mailing Address)	(City)	(State)	V	(Phone		5 0000
	(317)	(Diate)	1=157	(1110116)	"	
hereby assign <u>all my interest</u> in and to j	the entire application/pe	rmit/trans	fer order/lin	nited licen	se/groundwate	er
statement; (example, sold all	the land authorized und	ler the righ	nt)			
hereby assign <u>all my interest</u> in and to						
license/groundwater statement; (You			_		mala valda	
application/permit/transfer order/lim. portion of the land authorized under t		rstatemei	it to be assig	<i>jnea.</i> Exan	npie, soid a	
portion of the land dathorized ander	ine rightly					
hereby assign a portion of my interest	in and to the entire app	lication/p	ermit/transf	er order/li	imited	
license/groundwater statement; (exar	mple, adding an addition	al person)				
Application # <u>S-89238</u> ;	(R-1543	9		-	12372	
Application # 01270;	Permit # 2 - 1541	; Trans	sfer Order#	1	10);0	
11.04.011.00.00	(R-154	41	4. 84			
Limited License #	Groundwate	er Stateme	ent #		<i>)</i>	
as filed in the office of the Water Resources D	eirector to:					
_						
N ORE PINO	1, 110			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(Name of New Owner) 2349 Rickonk	ogcker Wy	N ₁	nord	0.0	95602	
(Mailing Address)	Chip	(State)	(7in)	(Phone)	10000	
(Mulling Address)	(City)	(State)	(214)	(Priorie w	7	N
						N
Note: If there are other owners of the prop						9707
or groundwater statement, you must						3 3
attach it to this form. Write the initial						o A
I hereby certify that I have notified al				s application	on, permit,	000
transfer order, limited license, or groundwa	iter statement of this ke	quest of A	ssignment.			9
Witness my hand this 30 day	of Avaust	. 20	22.			La
(Dav)	(Month)		(Year)			10
(==;;	0 0 1	2				2
Signature of Current Holder of Record	atting Im	TOW				- W
						8
Failure to provide any of the re	quired information will	result in t	he return of	your appl	ication.	1
This wife and second change	ot .					
This certifies assignment and record change Oregon Water Resources Department effecti	ive					
8:00 a.m. on date of receipt at Salem, Orego	n. The comp		quest for Ass			1,2
Fee receipt # 139428	form mus		itted to the		nt	10
For Director by Mary F. Bjork. Program Analy	yst in along with	the reco	rding fee of	\$120 .	1	
Water Rights Division.	_					

Last updated: July 20, 2021

Request for Assignment

WR

RECEIVED NOV 28 2022

OWRD