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.

I, We	estern State Steelhead, LLC						
(Nam	e of Current Holder of Reco	ord)					
2157 North Northlake Way		Seattle	WA	98103	(206)784-5000		
(Mailing Address)		(City)	(State)	(Zip)	(Phone #)		
	hereby assign <u>all my inte</u> statement; (example, solo			ansfer order/limited lice	nse/groundwater		
	hereby assign <u>all my interest</u> in and to <u>a portion</u> of application/permit/transfer order/limited license/groundwater statement; (<u>You must include a map</u> showing the portion of the application/permit/transfer order/limited license/groundwater statement to be assigned. Example, sold a portion of the land authorized under the right)						
		reby assign <u>a portion of my interest</u> in and to <u>the entire</u> application/permit/transfer order/limited ense/groundwater statement; (example, adding an additional person)					
Application # <u>G-11640</u> ; Permit # <u>G-18433</u> ; Transfer order							
			*				
	Limited License #		; Groundwater S				
as file	d in the office of the Water	Resources Director,	to:				
AgW	est Farm Credit, FLCA						
(Nam	e of New Owner)						
2157 N Northlake Way, Ste 120		Seattle	WA	98103-9184	(206)691-2000		
(Mailing Address)		(City)	(State)	(Zip)	(Phone #)		
And							
AgW	est Farm Credit, PCA						
(Nam	e of New Owner)						
2157 N Northlake Way, Ste 120		Seattle	WA	98103-9184	(206)691-2000		
(Mail	ing Address)	(City)	(State)	(Zip)	(Phone #)		

Pase I

And				
Western State Steelhead, LLC				
Name of New Owner)	-			
2157 North Northlake Way	Seattle	WA	98103	(206)784-5000
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)
groundwater statement, y this form. Write the initia	ou must provide a li ils (first letters) of your we notified all other	ribed in this application, p ist of all other owners' nan our first and last names at owners of the property de ent of this Request for Ass	nes and mailing addr the spot indicated be scribed in this applic	esses and attach it to low
Witness my hand this 8th		day of March	. 20	23
	(Day)		onth)	(Year)
Signature of Current Holder of R		Mun	\sim	×
		formation will result in t	he return of your a	polication
Fee receipt # For Director by Mary F. Bjork. Progra Water Rights Division.	m Analyst in for	e completed "Request for <i>m must</i> be submitted to the ong with the recording fee of the fee of th	e Department	
			RECE MAR 22 SALEM, OR	2023