## **Request for Assignment**



**Oregon 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 required.

	estwood Farms Inc. and Arrowhead Farms Inc. me of Current Holder of Record)				
-	See attached)				
	iling Address) (City)	(State)	(Zip)	(Phone #)	
X	hereby assign <u>all my interest</u> in and to <u>the entire</u> application/per statement; (example, sold all the land authorized unde	mit/trans er the righ	fer order/ nt)	limited license/groundwa	RECEIVED
	hereby assign <u>all my interest</u> in and to <u>a portion</u> of application/				APR 2 5 2023
	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)				OWRD
hereby assign a <u>portion of my interest</u> in and to <u>the entire</u> application/permit/transfer order/limited license/groundwater statement; (example, adding an additional person)					
	Application #; Permit #;	; Tran	sfer Orde	r #;	
	Limited License #; Groundwate	er Statem	ent # <u>3</u>	ز;	
as filed	iled in the office of the Water Resources Director, to:				
Champoeg Farms, Inc. and 2Hop, LLC pro rata					
(Name	me of New Owner) 6498 Champoeg Rd NE Saint Paul	OR	97137	(503)-633-2472	
(Mailin	iling Address) (City)	(State)		(Phone #)	
trar Wit	ote: If there are other owners of the property described in the app or groundwater statement, you must provide a list of all other attach it to this form. Write the initials (first letters) of your first. I hereby certify that I have notified all other owners of the pro ransfer order, limited license, or groundwater statement of this Record Company (Month)   Witness my hand this 14 day of APRIL   (Day) (Month)   ignature of Current Holder of Record AMAP BLACK	owners' r st and las perty des uest of As	names and t names a cribed in t	d mailing addresses and t the spot indicated below this application, permit,	2 8
John P. Coleman, President Michael C. Coleman, President Failure to provide any of the required information will result in the return of your application.					
Oreg 8:00 Fee r		t be subn	nitted to t	Assignment" he Department of <b>\$120</b> .	

Last updated: July 20, 2021

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