Request for Assignment By Proof of Ownership



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

(If Water Right Holder is Not Available)

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.

David Kranick + Marci Mu	rray			
(Name of Party Requesting Assignment)	-			
87228 Cranberry Creek Lane	. Bando	n or	97411	541-347-4579
Mailing Address)	(City)	(State) (Zip)	(Phone	2 #)
hereby request assignment of an <u>entire</u> application	n/permit/transfer	r order /limite	d license/grou	undwater statement;
hereby request assignment of a <u>portion</u> of applica (<u>You must include a map</u> showing the portion of a statement to be assigned.)				
Application # G - 12600 ; Permit #	6-13133	; Transfer Or	der #	i
Limited License #	; Groundwater S	Statement #		;
Vivian Brown (Deseased)				
(Name of Current Holder of Record)				
Nume of Current House of Necola				
(Mailing Address)	(City)	(State) (Zip)	(Phone	2 #)
Note: Write the initials (first letters) of your first and l	ast names at the	spots indicate	d below	
1) I certify that I am the current owner of the	property describe	d in this appli	cation, permit	transfer order.
limited license, or groundwater statement. I have				
to: a copy of the deed to the land, a copy of a lan				umentation of
survivorship of property held jointly. The Departs				t.
2)				
				0.
3) 1 have not been able to contact the owner				ction. I have
attached proof acceptable to the Department that		-	-	
each identified property owner not a party to the				nit this proof will
result in the return of your request. (Proof may in		limited to: a	copy of return	ed certified
mailing, copy of a Death Certificate, or a court or	der.)			
4)	ded herein is true	and correct t	o the best of n	
Witness my hand this 15 day of 3	UNE	20 23	-	. S
(Day)	(Month)	(Year)		
	10	2. 11	0	
Signature of Party Requesting Assign		My In	UN.	
Failure to provide any of the required info	mation will resu	It in the retur	n of your app	lication.
This certifies assignment and record change at				
Oregon Water Resources Department effective				RECEIV
8:00 a.m. on date of receipt at Salem, Oregon.	The complet	ed "Request	for Assignmen	" HEUEIV
Fee receipt # 140961			o the Departm	ient ILIN 20 no
For Director by Mary F. Bjork. Program Analyst in Water Rights Division.	along with t	he recording f	ee of \$120 .	JUN 20 20
10.2				OWRD
				SALEM OREG

Request for Assignment if Permit Holder not available

6-28-2023

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