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.

Frederick Franz	
Name of Current Holder of Record) 8203 Colonial Way Central Point, OR 97502	541-613-6053
Mailing Address) (City) (State) (Zip) (Phone #)	0.0
hereby assign <u>all my interest</u> in and to <u>the entire</u> application/permit/transfer order/limited license/groun statement; (example, sold all the land authorized under the right)	dwater
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, solo portion of the land authorized under the right)	ia
hereby assign a portion of my interest in and to the entire application/permit/transfer order/limited license/groundwater statement; (example, adding an additional person)	
Application # <u>S-87896</u> ; Permit # <u>S-55149</u> ; Transfer Order #	;
Limited License #; Groundwater Statement #;	
2.2.2. Twin Bridges Rd Gold Hill, OR 97525 805 Mailing Address) (City) (State) (Zip) (Phane #)	
Note: If there are other owners of the property described in the application, permit, transfer order, limited li or groundwater statement, you must provide a list of all other owners' names and mailing addresses ar attach it to this form. Write the initials (first letters) of your first and last names at the spot indicated b FAF I hereby certify that I have notified all other owners of the property described in this application, perm	elow
transfer order, limited license, or groundwater statement of this Request of Assignment. Witness my hand this <u>21</u> day of <u>Sept.</u> 20 <u>23</u> . (Day) (Month) (Year)	12 APP
Signature of Current Holder of Record X COPY Frederick A.	Franz 50
Failure to provide any of the required information will result in the return of your application.	As
This certifies assignment and record change at Oregon Water Resources Department effective 8:00 a.m. on date of receipt at Salem, Oregon. Fee receipt #	RECEIVE DEC 1 1 20
Water Rights Division. Request for Assignment	WR OWRD