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 an	d fee for each right will be red	quired.		
I, Dinsdale Farm Inc.				
(Name of Current Holder of Record) PO Box 1130	Cornelius	OR 97113	N/A	
(Mailing Address)	(City)	(State) (Zip)	(Phone #)	
hereby assign <u>all my interest</u> in an statement; (example, so hereby assign <u>all my interest</u> in a license/groundwater statement;	old all the land authorized und	der the right)	holm 6-13008	
application/permit/transfer orde portion of the land authorized u	er/limited license/groundwate nder the right)	er statement to be as	signed. Example, sold a	1
hereby assign <u>a portion of my inflicense/groundwater statement;</u> Application # 6 - 1302	terest in and to the entire app (example, adding an addition Permit # 6 - 2 3	nal person)	REC	CEIVED (1 5 2024
Limited License #	; Groundwat	ter Statement #		
s filed in the office of the Water Resour	ces Director, to:		O	WRD
Grace Dinsdale				•
Name of New Owner)	Osmalina	OD 07112	502 707 4007	
PO Box 447 'Mailing Address)	Cornelius (City)	OR 97113 (State) (Zip)	503.707.4997 (Phone #)	
Walling Address/	(City)	(State) (Elp)	(1.110112.11)	
Note: If there are other owners of the or groundwater statement, you attach it to this form. Write the I hereby certify that I have notify	must provide a list of all other initials (first letters) of your fir fied all other owners of the pr	r owners' names and rst and last names at operty described in 1	mailing addresses and the spot indicated below this application, permit,	proce
transfer order, limited license, or grou	1			2
Witness my hand this (Day)	day of 'May (Month)	20 24. (Year)	. 0 11 0	1
Signature of Current Holder of Record	(Inodle	Ir, Presidu	nt, instituten	ntipe 🎦
Failure to provide any of t	he required information will	result in the return	of your application.	de la
This certifies assignment and record characteristics of the Coregon Water Resources Department e			Receive	d
8:00 a.m. on date of receipt at Salem, O	regon. The comm	oleted "Request for	Assignment ^u	
Fee receipt # 142909 For Director by Mary Bjork. Program An	form mus	st be submitted to the high the recording fee of	ne DepartmentAPR 18 20)L"
Water Rights Division.		the recolumn feet	OWRD	i
t updated; July 20, 2021	Request for Assignme	nt Rec	eived wr	
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