

Request for **Assignment**

If for multiple rights, a separate form and fee for each right will be required.
I, Oregon Farview Home (Name of Applicant / Permit / Transfer Holder)
Clo Department of Human Services OR 500 Summer Street Salam Oregon 97310
(Mailing address) (City) (State) (Zip) (Phone #)
hereby assign <u>all my interest</u> in and to application/permit/transfer; RECEIVED
hereby assign <u>all my interest</u> in and to a <u>portion</u> of application/permit/transfer; (You must include a map showing the portion of the application/permit to be assigned) JUN 28 2007
☐hereby assign <u>a portion of my interest</u> in and to the <u>entire</u> application/permit/transfer; SALEM, OREGON
Application #, Permit #; Transfer #
Application #, Permit #; Transfer #
as filed in the office of the Water Resources Director, to:
Sustainable Investments LLC.
(Name of New Owner)
P.O. Box 2071 Salem OR 97308 503 - 930-454/ (Mailing address) (City) (State) (Zip) (Phone #)
(Mailing address) (City) (State) (Zip) (Phone #)
NOTE: If there are other owners of the property described in this Application, Permit, Transfer or Certificate of Ground Water Registration, you must provide a list of all other owners' names and mailing addresses and attach it to this form.
I hereby certify that I have notified all other owners of the property described in this Application, Permit or Certificate of Registration of this request for assignment.
Witness my hand this 3/ day of May 2007
Applicant/Permit holder
Applicant/Permit holder
DO NOT WRITE IN THIS BOX The completed "Request for Assignment" form must be submitted to the Department along with the appropriate
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 # 83 7 7 1

Water Rights Division