Received

FEB 0 5 2025

OWRD

Request for Assignment By Proof of Ownership

(If Water Right Holder is Not Available)



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

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.

, Myron Kuenzi				
(Name of Party Requesting Assignment)				
6475 State St	Salem, C	R 973	17	
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)
A hereby request assignment of an entire appli	cation/permit/trans	fer order	/limited lic	ense/groundwater statement;
hereby request assignment of a <u>portion</u> of ap (<u>You</u> <u>must include a map</u> showing the portio statement to be assigned.)				
Application #G-18884; Pern	nit# <u>G-1850</u>	9; Tran	sfer Order #	, NA ;
Limited License #NA	; Groundwate	er Statem	ent# <u>NA</u>	;
Myron and Diane Kuenzi Famil	ly Farm LLC			
(Name of Current Holder of Record)	-			
6475 State St	Sal	em, OI	R 97317	1
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)
Note: Write the initials (first letters) of your first	and last names at th	ne spots i	ndicated be	low
1) Mr I certify that I am the current owner of limited license, or groundwater statement. I to: a copy of the deed to the land, a copy of survivorship of property held jointly. The De	have attached proc a land sales contra	of owners ct, a cour	rship that r t order or d	may include but not be limited ecree, documentation of
2) <u>wh</u> I have the legal right to request assign	nment under OAR 6	90-310-02	280 and 690	0-320-0060.
3) I have not been able to contact the o attached proof acceptable to the Departme each identified property owner not a party result in the return of your request. (Proof I mailing, copy of a Death Certificate, or a con-	nt that notice of the to the assignment. (may include but not	e assignme ORS 537.2	ent has bee 220(2) <u>Failu</u>	n given or attempted for re to submit this proof will
4) MY I further certify that the information	provided herein is to	rue and co	orrect to the	e best of my knowledge.
Witness my hand this (p day of Day)	(Month)	, 20	25. (Year)	
Signature of Party Requesting A Failure to provide any of the required				your application.

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 #

For Director by Mary F. Bjork. Program Analyst in Water Rights Division.

The completed "Request for Assignment" form *must* be submitted to the Department along with the recording fee of \$120.