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.

I, Christopher J. & Rachel P. Henricks				
(Name of Party Requesting Assignment)				
35208 Spicer Drive Lebanon, Oregon 97355	541-971-7657	3		
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 must include a map</u> showing the portion statement to be assigned.)				
Application # R-85657 Pern	nit# <u>R-13429</u>	; Transfer Order	#	
Limited License#		er Statement #	;	
Dennis Miller For Earl and Mildred	Miller, LLC			
(Name of Qurrent Holder of Record)				Ď
unknown	(04.4	(Chata) (Zn)	(Floor of 41)	
Mailing Address)	(City)	(State) (Zp)	(Phone #)	4
Note: Write the initials (first letters) of your first	and last names at th	e snots indicated he	low	1
1) Loertify that I am the current owner or limited license, or groundwater statement. It to: a copy of the deed to the land, a copy of survivorship of property held jointly. The De	have attached proof a land sales contrac	f of ownership that r t, a ∞urt order or d	nay include but not l ecree, documentation	oe limited
2) <u>MM</u> I have the legal right to request assign	nment under OAR69	0-310-0280 and 690)-320-0060.	20
3) I have not been able to contact the o attached proof acceptable to the Department each identified property owner not a party to result in the return of your request. (Proof remailing, copy of a Death Certificate, or a countain the return of your request.)	nt that notice of the to the assignment. C may include but not l	assignment has bee PRS 537.220(2) <u>Failur</u>	n given or attempte e to submit this pro	d for hof will
4) <u>MM</u> I further certify that the information p	80 10 C 10 Personal	ue and correct to the	best of my knowled	ceived by OW
Witness my hand this 7th day of	January	,2025	-	MAR 1 4 2025
Signatures of parties requesting assignr	nent Ra	and to		Salem, OR
Failure to provide any of the required info	ormation will result	in the return of yo	ur application	
	ormation will result	in the return of yo		Received

8:00 a.m. on date of receipt at Salem, Oregon.

Water Rights Division. M

For Director by Mary F. Bjork. Program Analyst in

Fee receipt # 144868

The completed "Request for Assignment"

along with the recording fee of \$120.

form must be submitted to the Department

FEB 2 1 2025

OWRD