## **Request for Assignment**

If for multiple rights, a separate form and fee for each right will be required.



**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.

PO	of Current Holder of P Box 765 g Address)	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, whi	_	OR 97411 (State) (Zip)	541-40 (Phone #)	04-2069
×	hereby assign <u>all my i</u>	nterest in and to the (example, sold all the		ermit/transfer order/li der the right)	mited license/grou	ndwater
	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, sold a portion of the land authorized under the right)					
	hereby assign <u>a portion of my interest</u> in and to <u>the entire</u> application/permit/transfer order/limited license/groundwater statement; (example, adding an additional person)					
	Application # $R$	-60384 ; Pe	rmit # R-827	; Transfer Order #		Received
	Limited	License #	; Groundwa	ter Statement #	;	JUN 2 3 2025
(Name	of New Owner)	nt and	d Steve	Cant OR 974 (State) (Zip)	1) 541-4 (Phone #)	OWRD +0+-6385
T6 trans	or groundwater star attach it to this form I hereby certify that sfer order, limited lice ness my hand this	tement, you must pron. Write the initials (find the initials of the initials o	ovide a list of all other irst letters) of your f ther owners of the p statement of this R (Month)		nailing addresses a he spot indicated b	nd J N Selow
Signature of Current Holder of Record <u>Lames</u> <u>E</u> <u>Jant</u> Failure to provide any of the required information will result in the return of your application.						
Oreg 8:00 Fee For	certifies assignment and gon Water Resources Delarm. on date of receipt receipt #/	Department effective t at Salem, Oregon.	form mu	pleted "Request for As ist be submitted to the th the recording fee of	Department	