R	EC	EIV	ED
---	----	-----	----

REQUEST FOR ASSIGNMENT

JAN 1 9 2006

WATER RESOURCES DEPT SALEM, OREGON

We, (permit holder, applicant) Michael G. Robertson and Alene M. Robertson

1012 N	W Alder Creek Dr.	Corvellie OR 97330	(541) 745-2515		
	g address)	(City, State, Zip)	(Phone)		
(
CHECK					
[X]	hereby assign <u>all my interest</u> in a	id to application/permit;			
[]	hereby assign <u>all my interest</u> in and to a portion of application/permit (include a map showing portion of application assigned);				
[]	hereby assign a portion of my int	erest in and to the entire application/permit;			
Application #;					
OR GR	Statement #	, GR Certificate of Registration #	as		
filed in	the office of the Water Resources	Director. <u>TO</u> :	~ ~ ~~ ~~ ~~ ~~ ~		
			(641) 746 3616		
	I G. Robertson and Alene M. Robe of new owner)	rtson	(541) 745-2515 (phone #)		
(name c	it new owner)		(phone ")		
<u>1012 N</u>	W Alder Creek Dr.	Corvallis, OR 97330			
(address	s)	(city, state, zip)			
Monthern	ant Form Cradit Sorviage FLCA		(877) 864-0398		
	of new owner)				
(<u> </u>				
		Spokane, WA 99220	v		
(addres	s)	(city, state, zip)			
		operty described in this Application, Permit or names and addresses to this form.)	(phone #)		
Certific	ate of Registration of this request	-	0///		
Witness	s my hand this	day of December 22	<u>,2005</u> P		
	applic	day of December 22 cant/permit holder Michael J.	Palt		
	аррис	cant/permit holder <u>Alene Me for</u>			
	applic	cant/permit holder			
PLEAS	E DO NOT WRITE IN THIS BO	x			
	is certifies assignment and record change at The completed assignment must be submitted to the Water				
	Water Resources Department effective Resources Department together with a recording fee of \$25.				
	on date of receipt at Salem, Oregon.	Additional pages will cost \$5 per page			
· Fee recei	ipt # 79555 11 0				
	or Director by Jerry Sauce Program Analyst in WATER RESOURCES DEPARTMENT				
water Kig	ter Rights Division /// Jack 725 SUMMER STREET NE, SUITE A				
L		SALEM, OREGON 97301-2430			