## **REQUEST FOR ASSIGNMENT**

| I, George Ro  | ogers, Rogers Asso   | ciates - Oregon                     |  |  |   |               |
|---|--|-------------------------------------|--|--|---|---------------|
| (Name   | e of Applicant / Perm  | nit / Transfer Holo                 | der)   |  |   | _             |
| P.O. Box 378  | 89   | Bristol                             | TN   | 37625  | (800) 251-0239  | _             |
| (mailir   | ng address)  | (City)                              | (State)  | (Zip)  | (Phone #)   |               |
| CHECK O   | <u>NE</u>  |                                     |  |  | RECE  | VED           |
| □hereby a   | assign <i>all my int</i>   | <u>erest</u> in and to              | o application/p                                  | ermit/transfe  | er; FEB 24  | 2005          |
|   | st include a map   |                                     |  |  | oermit/transferRESOU<br>ermit to be SALEM, O                        |               |
| □hereby a<br>trans  | assign <u>a <i>portion</i></u><br>fer;                                 | of my interes                       | <u>st</u> in and to the                          | e <u>e<i>ntire</i></u> appli                                     | ication/permit/   |               |
| Application   | #_G-14605  | , Permit #                          | G-13570  | , Trans  | sfer #  | _             |
|   |  | -(                                  | JR-  |  |   |               |
| GR Stateme  | ent #  | , G                                 | K Certificate                                    | oi Registrati  | ion #   | -             |
| as filed in th  | e office of the W  | ater Resource                       | es Director, to:                                 |  |   |               |
| Brian Rissbe  | <u> </u>   |                                     |  |  |   | _             |
| (Name   | e of New Owner)  |                                     |  |  |   |               |
|   | ville Road NE  | Aurora                              | OR (Ot-1-)                                       | 97002  | (503) 678-2001  | - J           |
| (mailir   | ng address)  | (City)                              | (State)  | (Zip)  | (Phone #)   | £ (2)         |
| <u>NOTE:</u>  |  | er or Certificate<br>of all other o | e of Ground W                                    | /ater Registr  | is Application,<br>ation, <b>you must</b><br><b>g addresses and</b> | 2016 of Power |
| Application,  | tify that I have no<br>Permit or Certific                              | cate of Regist                      | ration of this re                                | equest for as  | signment.   | 1             |
| Witness my  | hand this $22$   | Nd day of                           | February   | , 20 <u>_0</u> _S  |   | - A           |
|   |  | nt/Permit holde                     | Λ.   | A. Ros   |   | `             |
|   |  |                                     | / 0  |  |   | -             |
|   | Applicar   | nt/Permit holde                     | er   |  |   | -             |
| DO NOT W  | RITE IN THIS   | BOY T                               | he completed                                     | "Peguest for   | Assignment" form  | <b>.</b>      |
| This certifies as<br>Oregon Water Ro<br>8:00a.m. on date<br>Fee receipt # | essignment and record clesources Department et of receipt at Salem, Or | hange at fective regon.             | oust be submit<br>ith the approp<br>\$25 for the | ted to the De<br>riate recordir<br>first page, a<br>additional p | epartment along<br>ng fees:<br>and<br>page.                         |               |
| For Director by<br>Water Rights Div                                       | Jerry Sayler, Program<br>vision  | •                                   | ATER RESO  | URCES DEF  | PARTMENT  |               |

WATER RESOURCES DEPARTMENT 725 SUMMER STREET NE, SUITE A SALEM, OREGON 97301-1271