

Request for **Assignment**

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

, , , , , , , , , , , , , , , , , , , ,	Permit / Transfer H	oluci)		
2423 12th Ave East	Vale	OR	97918	541-473-2237
(Mailing address)	(City)	(State)	(Zip)	(Phone #)
hereby assign all my i	nterest in and to app	lication/pe	rmit/transfer	RECE
☐hereby assign <u>all my in</u> (You must include a n				mit/transfer; JAN 1 Spermit to be assigned MATER RESUSALEM, C
hereby assign <u>a portion</u>	<i>n <u>of my interest</u></i> in ar	nd to the <u>en</u>	<i>tire</i> applicati	on/permit/transfer;
Application # R-85925	, Permit # <u>R</u>	-13953	; Tran	sfer #
GR Statement #	. GR Certific	-OR-	stration #	
s filed in the office of the W	ater Resources Dire	ctor, to:		
Rex A. & Patricia R. Maag				
(Name of New Owner)	Vale	OF	R 979	18 541-473-2237
(Name of New Owner) 2423 12th Ave East	Vale (City)	OF		18 541-473-2237 (Phone #)
(Name of New Owner) 2423 12th Ave East (Mailing address) NOTE: If there are of Certificate of	(City) ther owners of the pr	(Storoperty descistration, year	cribed in this	
(Name of New Owner) 2423 12th Ave East (Mailing address) NOTE: If there are of Certificate of names and m I hereby certify that I have no	(City) ther owners of the process of	(Statement of the property desistration, year attach it the term of the property of the proper	cribed in this ou must prove this form.	(Phone #) Application, Permit, Transfer or
(Name of New Owner) 2423 12th Ave East (Mailing address) NOTE: If there are of Certificate of names and m I hereby certify that I have no or Certificate of Registration	(City) ther owners of the process of	(Statement of the particular o	cribed in this ou must prove this form.	(Phone #) Application, Permit, Transfer or ide a list of all other owners' ribed in this Application, Permit
Certificate of names and m	(City) ther owners of the process of	(Statement of the particular o	cribed in this ou must prove this form.	(Phone #) Application, Permit, Transfer or ide a list of all other owners' ribed in this Application, Permit

DO NOT WRITE IN THIS BOX

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 # **91217**

For Director by Jerry Sauter, Program Analyst in Water Rights Division

The completed "Request for Assignment" form *must* be submitted to the Department along with a recording fee of \$50.

1.15.2008