

## **Request for** Assignment

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

I, Archie McVay					
(Name of Applicant / Pern	nit / Transfer Ho	older)			
PO Box 2126	Harbor	OR	97415	(541) 469-2753	
(Mailing address)	(City)	(State) (	Zip)	(Phone #)	
hereby assign all my intere	st in and to appl	ication/pern	nit/transfer;		
hereby assign <u>all my intere</u> (You must include a map s			_		
hereby assign <u>a portion of r</u>	<i>ny interest</i> in an	d to the <u>enti</u>	re application	/permit/transfer;	
Application # F-47421	, Permit # <u>35</u>	534	; Transfe	er#	RECEIVED
GR Statement #					
		_			MAR 0 4 2008
as filed in the office of the Water	Resources Direc	ctor, to:		WAT	ER RESOURCES DEPT
Wilderness Retreat EIN 51-06	666-29				SALEM. OREGON
(Name of New Owner)					
PO Box 1295	Brookings	OR	97415	(541) 469-43	34
(Mailing address)	(City)	(Stat	e) (Zip)	(Phone #)	<i>a</i>
NOTE:  If there are other owners of the property described in this Application, Permit, Transfer or Certificate of Ground Water Registration, you must provide a list of all other owners' names and mailing addresses and attach it to this form.					
I hereby certify that I have notified all other owners of the property described in this Application, Permit or Certificate of Registration of this request for assignment.					
Witness my hand this 6th day of FEBRUARY, 2008.  Applicant/Permit holder Orchie Mc Oay					
Applicant/Permit holder _ (frekee M c/ ay					
Applicant/Permit holder					

## 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 Selem, Oregon. Fee receipt # 41645

For Director by Jerry Saute Water Rights Division

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