REQUEST FOR ASSIGNMENT

I, Clackamas Water District
_____
(Name of Applicant / Permit / Transfer Holder)

P.O. Box 2439	Clackamas	OR	97105	503.722.9220
(mailing address)	(City)	(State)	(Zip)	(Phone #)

CHECK ONE

☑ ...hereby assign **_all my interest_** in and to application/permit/transfer;

☐ ...hereby assign **_all my interest_** in and to a **_portion_** of application/permit/transfer;
(You must include a map showing the portion of the application/permit to be assigned.)

☐ ...hereby assign **_a portion of my interest_** in and to the **_entire_** application/permit/transfer;

Application # S-46072_____, **Permit #** S-34426_____, **Transfer #** n/a_____
                              -OR-
GR Statement # n/a_____, **GR Certificate of Registration #** n/a_____

as filed in the office of the Water Resources Director, to:

Clackamas River Water
_____
(Name of New Owner)

P.O. Box 2439	Clackamas	OR	97105	503.722.9220
(mailing address)	(City)	(State)	(Zip)	(Phone #)

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 __16__ day of __October__, 20__06__

Applicant/Permit holder _____

Applicant/Permit holder _____

DO NOT WRITE IN THIS BOX

- This certifies assignment and record change at Oregon Water Resources Department effective 8:00a.m. on date of receipt at Salem, Oregon.
- Fee receipt # 89956
- 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 the appropriate recording fees:

♦ **$25 for the first page, *and***
♦ **$5 for *each* additional page.**
[as required by ORS 536.050(1)(d)]

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