REQUEST FOR ASSIGNMENT

Cunthia M.	Cojaway		OLDER IS NOT A	VAILABLE)
63480 0B (Mailing address)	Riley Ben	OR (State)	97701	541 480 1480 (Phone #)
CHECK ONE	(3.4)	(Ciaic)		(* 116.116 117)
	assignment in and to app	olication/permit/trans	sfer:	
	assignment in and to a p	•		
	e a map showing the po			to be assigned.)
property held joint	proof of ownership that r f a land sales contract, a ly; iclude \$5 for <u>each</u> addit		be limited to: a copee, documentation	by of the deed to of survivorship of
Application # _) ねし	163, Permit #	11785	, Transfer#_	
GP Statement #	, GR C	-OR-	ration#	
Name of Permit/Transfer (Malling address)	(City)	OR (State)	(Zip)	(Phone #)
NOTE: If there a	are other owners of the picate of Ground Water R' names and mailing ad	property described in egistration, you mu	n this Application, I st provide a list o	Permit, Transfer, of all other
Permit or Certificate o	nave notified all other ow f Registration of this requ	uest for assignment.		Application,
Witness my hand this	10th day of 1	<u> 20</u>	06.	
Party Requesti	ng Assignment	& Mal		ď
Party Requesti	ng Assignment		·	O.R. D.
DO NOT WRITE	IN THIS BOX	must be submit	"Request for Assignment of the Department of the	•
- This certifies assignment a		• \$25 fo	r the first page, a	and

8:00a.m. on date of receipt at Salem, Oregon.
- Fee receipt # 43319

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

- ♦ \$5 for <u>each</u> additional page. [as required by ORS 536.050(1)(d)]

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

APR 1 0 2006 RECEIVE