

Request for **Assignment**

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

| I, JACK L. AN | D DORIS H. KITT | REDGE | | | _ | | |
|--|--|---|-------------------------------|-------------------------------|---|---------------------------------|------------------|
| | | mit / Transfer Holde | r) | | - | | |
| PO Box 25 | | FORT ROCK | OR | 97735 | 541-576-223 | 7 | |
| (Mailing add | iress) | (City) (St | ate) (Z | Zip) | (Phone #) | RECEI | VED |
| hereby a | ssign <i>all my inter</i> | est in and to applicat | ion/perm | it/transfer; | | JUN 12 | |
| hereby a (You mu | ssign <u>all my inter</u> ust include a map | est in and to a <u>portion</u> showing the portion | <u>n</u> of appl of the ap | ication/perm plication/per | it/transfer; mit to be assign | VATER HE ORI ed.) SALEM, ORI | ues dest Egon |
| hereby as | ssign <i>a portion of</i> | <i>my interest</i> in and to | the <u>entir</u> | e application | /permit/transfer; | ı | |
| Application #_ | | , Permit # | | ; Transfe | er # <u>9033</u> | | |
| Application # | | | | | | | VED |
| | | Resources Director, | | | | MAY 16 | 2008 |
| DORIS H. KIT | TREDGE | | | | WA | TER RESOUR | CES DEPT |
| (Name of New | Owner) | Tilleria Tilleria de la roma | | | | SALEM OR | EGON |
| PO BOX 25 | | FORT ROCK | OR | 97735 | 541-576 | -2237 | |
| (Mailing addre | ess) | (City) | (State |) (Zip) | (Phone #) | | |
| 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 | | | | | | | J. 6-13-208 |
| | Applican | t/Permit holder | Sor | is 71. | Litere | Rz: | 9. Vie |
| | | t/Permit holder | | | | | /- |
| This certifie Oregon Wat 8:00 a.m. or Fee receipt | by Jerry Sauter/Pr | cord change at trment effective alem, Oregon. | form | n <i>must</i> be sul | Request for Assi omitted to the De ording fee of \$50 | epartment | |