## REQUEST FOR ASSIGNMENT

I, (permit holder, applicant) ${\cal I}$	AYLOR	RANC	H, INC		
HC 64 BOX 415 LAKEY	IEW ORE	FGON .	97630	(541)	947-2869
	y) (state				(phone)
CHECK ONE  [X] - hereby assign all my inter  [] - hereby assign all my inter	rest in and	d to a	portion of		ation/permit
(include a map showing portion o	f applicat	ion ass	igned);		
[ ] - hereby assign <u>a port</u> application/permit; R-72059		R - 1	11248	nd to	the entire
Application # 5-72060	_, Permit	# _5 -	53024	;	
OR GR Statement #, filed in the office of the Water	Resources	Direct	or, <u>TO</u> :		
TAYLOR WESTSIDE RANCH	, INC TO	ay/or			769
(name of new owner)			(phone		
HC 64 BOX 415 LAKE	VIEW O	REGON	976	30	
(address) (c	ity) (s	tate)	(zip)		
names and addresses to this form  I hereby certify that I have noti  in this Application, Permit or C  assignment.	fied all of	of Reg	gistration (	of this	request for
Witness my hand this	day o	£ ///	anh:	20 01	
applicant/perm		1		in his	
applicant/perm	nit holder	Of	Taylor		
PLEASE DO NOT WRITE IN THIS BOX					
STATE OF OREGON, } } ss County of Marion. } I certify that the within was received by me on the day of	mu Wa De	ist be s iter Res epartmen	leted assig submitted t sources nt together ecording fe	o the	
Miscellaneous Records, Vol.	\$2 Wi	25. Add	ditional pa ; \$5 per pa	ges ge.	Pup Out
Page <u>70</u> / Water Resources Director	s		RESOURCES D TH STREET		RECEIVE

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