

Request for **Assignment**

If for multiple rights, a separate form and fee for each right will be required. I. J. Frank Schmidt and Son Company (Name of Applicant / Permit / Transfer Holder) P.O. Box 189 Boring 97009 (503) 663-41 (Phone #) (Mailing address) (City) (State) ...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.) RECEIVED ...hereby assign a portion of my interest in and to the entire application/permit/transfer, OCT 06 2008 Application # G-13195 , Permit # G-12095 ; Transfer # WATER RESOURCES DEPT SALEM, OREGON ____, GR Certificate of Registration #_____ as filed in the office of the Water Resources Director, to: Northwest Farm Credit Services, FLCA (Name of New Owner) OR P.O. 13309 97309 (503) 373-3002 Salem (Mailing address) (City) (State) (Phone #) If there are other owners of the property described in this Application, Permit, Transfer or *NOTE:* 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 16th day of September, 2008. 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 # 94469

- 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.



Request for Assignment

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

| I, J. Frank Schmidt | and Son Company | | | | | |
|---|---|--|---------------------------|---------------------------------|-----------------------------------|------------------|
| (Name of App | licant / Permit / Transfer H | older) | | | | |
| P.O. Box 189 | Boring | OR | | 97009 (503) 663-41 a | | |
| (Mailing address) | (City) | (State) (Zi | p) | (Phone #) | | |
| hereby assign | all my interest in and to app | lication/permit | /transfer; | | RECEI | VED |
| (You must inc | <u>all my interest</u> in and to a <u>pelude a map showing the por</u> a <u>portion of my interest</u> in a | tion of the app | lication/pern | iit to be assigned | OCT 06 TER RESOUR SALEM, OR | RCES DE |
| Application #_G-131 | 195 , Permit # <u>G</u> | -12095 | ; Transfer | ·# | <u>.</u> | |
| GR Statement # | , GR Certific | -OR- ate of Registra | tion # | | | |
| as filed in the office of J. Frank Schmidt an (Name of New Owne | | ector, to: | | | | |
| P.O. 189 | Boring | OR | 97009 | (503) 663 | 3-4128 | |
| (Mailing address) | (City) | (State) | (Zip) | (Phone #) | | |
| Certinal Certinal Certinal I hereby certify that I | are are other owners of the proficate of Ground Water Reg es and mailing addresses and I have notified all other own istration of this request for a | istration, you n d attach it to th ers of the prop | ust provide d is form. | a list of all other | owners' | ASSIGN INSTITUTE |
| - | - | | | | | 1 |
| Witness my hand this | s 16th day of 54 Applicant/Permit holder | olemoer, | 20.08. | | | |
| | Applicant/Permit holder | Je t | A L | Citte | - | |
| | 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 # 94468

- For Director by Jerry Sauter Water Rights Division

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