REQUEST FOR ASSIGNMENT

1. HARRI	ETT CH	MBERL	A1U			
(Name	of Applicant /	Permit / J	ransfer Holder)		4	
559 BR	OWL) S A ORO	Hwy.	EAGLE POINT	OR	97524	(541) 826-3303
(mailin	g address)	•	(City)	(State)	(Zip)	(Phone #)
CHECK ON	1E					RECEIVED
□hereby a	issign <u>all m</u>		st in and to ap		•	WATER RESOURCES DEP
(You mus	st include a	map sho	wing the porti	on of the	application/pe	ermit/transfe#ALEM, OREGON rmit to be
assigned	•		36 IW 02BA		_	
transf	fer;		<i>my interest</i> in			
Application	#		, Permit #	· .	, Trans	T-7823 POD OLLY
			-OR-		(D - 1 (- 4)	T-7823 POO OLLY
GR Statement #, GR Certificate of Registration #						
as filed in the office of the Water Resources Director, to:						
(Name	CHAO of New Own	<i>ußerL4 id</i> er)	<u></u>			
563 BROW	ILSBORO AU	w. <i>(</i> -2)	1645 POLUT	OR	97524	(5di) 761-568M
(mailin	ng address)	7	(City)	(State)	(Zip)	(Phone #)
(mailing address) (City) (State) (State) (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.						
•	•		ed all other ow e of Registration			scribed in this signment.
Witness my			day ofM	. 1	, 20_06	s silling
	Ap	plicant/P	ermit holder _	(darri	it Chaml	reclam_
	Ар	plicant/P	ermit holder _			
DO NOT W	/RITE IN T	HIS BO		•	•	Assignment" form
			must	<i>be</i> subm	itted to the De	partment along

- This certifies assignment and record change at Oregon Water Resources Department effective

8:00a.m. on date of receipt at Salem, Oregon.
- Fee receipt # 8/573
- For Director by Jerry Saural Program analy. Water Rights Division

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** TALL FOR STATE