REQUEST FOR ASSIGNMENT

1, HARRIETT						
(Name of App	olicant / Permit	Transfer Holder)			_	
559 BROWNS		EAGLE POINT		97524	(541) 826-3	303
(mailing addr	9SS)	(City)	(State)	(Zip)	(Phone #)	CEIVED
CHECK ONE						
□hereby assign	all my inter	est in and to ap	plication/	permit/transfe	er:	18 2006
☑hereby assign (You must Incl assIgned.)	ude a map si	est in and to a proving the porting the po	on of the	application/pe	permit/transfe#ALEI Permit to be	SOURCES DEP M, OREGON
☐hereby assign transfer;					-	
Application #		, Permit #		, Transfer # T- 7823 & T- 7824 T-7823 POO OLLY		
GR Statement #		-OR-	ortificato	of Registrat	7-7823 PO	ONLY
						_
as filed in the office			irector, to	:		
LEVI (Name of No.	-HAMBERLA	1W				_
(Name of New	,	~ · · · · · · · ·	OP	0000/	C 13 - 61	~ cm M
S63 BROWLIBUR (mailing addr	o Awy. <u>C</u> ess)	(City)	OR (State)	97524 (Zip)	(Phone #)	- %
, -	·	, , ,			(*	4
Peri pro	mit, Transfer	all other owne	Ground	Nater Registr	(Phone #) nis Application, ration, you must ng addresses and escribed in this esignment.	11M ASS/6N1 5/18/4006
I hereby certify the Application, Perm					escribed in this signment.	PARTING J. STA
Witness my hand	this	day of Ma	u,	, 20 🔿	, s .	All you
·		Permit holder _	<u> </u>	& Cham	herlam	-
	Applicant/	Permit holder _	·			<u>.</u>
DO NOT WRITE	IN THIS B	must	be subm	•	Assignment" form epartment along ng fees:	n
- This certifies assignmen Oregon Water Resources 8:00a.m. on date of receip - Fee receipt # 8/573	Department effection of the Salem, Oregon	e at Ve [as re	5 for <u>eac</u>	first page, a h additional (ORS 536.050(page.	
- For Director by Jerry Sa		WAT	ED DESC	HIDCES DE	DADTMENT	

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

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