

Robert L. & Dolores M. Smith (Name of Party Requesting Assignment)

Request for **Assignment**

By Proof of Ownership (If Permit/Transfer Holder is not available)

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

	Roseburg	OR	97471	541-672-7061
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)
✓ …hereby request assignr	nent of application/permit/tra	nsfer;		
	ment of a <i>portion</i> of applicati cap showing the portion of th			ransfer to be assigned.)
I have attached proof of ownership of a land sales contract, a court or Department cannot accept a copy	ler or decree, documentation			
Application #	; Permit #	; Tra	nsfer#	T-5259
GR Statement #	-OR- GR Certificate of Registration	on #		RECEIVE
G. H. Brey (Name of Permit/Transfer Ho	lder of Record)			OCT 0 2 2008 WATER RESOURCES D SALEM, OREGON
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)
NT / NT - 1 1 - 0 - 1	6 . 11 . 1 5		at notice of	the assignment has been
 Failure to submit this prolimited to: a copy of retur I certify that I am the curr of Registration. I have the legal right to re I have not been able to co right. 	ch identified property owner is of will result in the return of med certified mailing, copy of ent owner of the property desquest assignment under OAR ntact the owner(s) of record formation provided herein is	not a party your required a Death of ecribed in 690-310- for the about true and control	to the assignment of the control of	gnment. ORS 537.220(2) may include but not be or a court order.) tion, Permit or Certificate 90-320-0060. ed application or water e best of my knowledge.

Assign By Proce

For Director by Jerry Sauter Water Rights Division

Oregon Water Resources Department effective

8:00 a.m. on date of receipt at Salem, Oregon. Fee receipt #94428

The completed "Request for Assignment form

a recording fee of \$50.

must be submitted to the Department along with