## Request for Assignment

By Proof of Ownership

| (If Permit/I ransfer Holder is not available)   |
|---|
| If for multiple rights, a separate form and fee for each right will be required.  |
| I, Cordes + Company As Receiver for Cascade  (Name of Party Requesting Assignment)  Trees In  |
|   |
| (Mailing Address) OR (City) (State) (Zip) (Phone #)   |
| hereby request assignment of application/permit/transfer;   |
| hereby request assignment of a portion of application/permit/transfer;  (You must include a map showing the portion of the application/permit/transfer to be assigned.)   |
| I have attached proof of ownership that may include but not be limited to: a copy of the deed to the land, a copy of a land sales contract, a court order or decree, documentation of survivorship of property held jointly. The Department cannot accept a copy of a tax statement.  |
| Application # G14510; Permit # G13333; Transfer#  |
| -OR- GR Statement #, GR Certificate of Registration #   |
| Kurt A Sacher Cascade West Trees Inc  |
| (Name of Permit/Transfer Holder of Record)  |
| Box 1245 Canby OR 97013-1245  |
| (Mailing Address) (City) (State) (Zip) (Phone #)  |
| Note: You are required to furnish proof acceptable to the Department that notice of the assignment has been given or attempted for each identified property owner not a party to the assignment. ORS 537.220(2)  Failure to submit this proof will result in the return of your request. (Proof may include but not be limited to: a copy of returned certified mailing, copy of a Death Certificate, or a court order.)  |
| 1) I certify that I am the current owner of the property described in this application, Permit or Certificate of Registration.  |
| <ol> <li>I certify that I am the current owner of the property described in this application, Permit or Certificate of Registration.</li> <li>I have the legal right to request assignment under OAR 690-310-0280 and 690-320-0060.</li> <li>I have not been able to contact the owner(s) of record for the above referenced application or water right.</li> <li>I further certify that the information provided herein is true and correct to the best of my knowledge.</li> </ol> Witness my hand this |
| right. 4) I further certify that the information provided herein is true and correct to the best of my knowledge.   |
| Witness my hand this 23 day of 20 09  |
| Party Requesting Assignment   |
| Party Requesting Assignment   |
| DO NOT WRITE IN THIS BOX  |
| This certifies assignment and record change at Oregon Water Resources Department effective 8:00 a m on date of receipt at Salem. Oregon.  The completed "Request for Assignment form must be submitted to the Department along with a recording fee of \$50.  |

Fee receipt #46050 For Director by Jerry Sauter, Program

**RECEIVED** 

Last updated: Aug 17, 2007

Water Rights Division

Request for Assignment

APR 0 3 2009

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WATER RESOURCES DEPT SALEM, OREGON