



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem Oregon 97301
 (503) 986-0900
 www.wrd.state.or.us

Request for Assignment

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

I, Steve Rickman
 (Name of Applicant / Permit / Transfer Holder)

69705 Old Experiment Rd Burns OR 97720 541-573-2887
 (Mailing address) (City) (State) (Zip) (Phone #)

- ...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.)
- ...hereby assign a portion of my interest in and to the entire application/permit/transfer;

Application # G-16257, Permit # G-15942; Transfer # _____ **RECEIVED**
 -OR-
 GR Statement # _____, GR Certificate of Registration # _____ **APR 10 2009**

as filed in the office of the Water Resources Director, to:
Andy Root
 (Name of New Owner)

524 Hwy 20 N Hines OR 97738 541-573-3615
 (Mailing address) (City) (State) (Zip) (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.

Witness my hand this 8th day of April, 2009.
 Applicant/Permit holder Steve Rickman
 Applicant/Permit holder _____

O.R. ASSIGN
 A.S. 4-10-2009



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.
 Fee receipt # 9612
 For Director by Jerry Sauter, Program Analyst in Water Rights Division Jerry Sauter

The completed "Request for Assignment" form *must* be submitted to the Department along with a recording fee of \$50.