

Request for **Assignment**

If for multiple	rights, a s	eparate	form and fee for	each right	will be requir	ed.		
I, LARR	y W.	4	SUSAN mit / Transfer H	G.	Hu11	·		
Po Bo	× /3	2/ (CLATSKANIE (City)	2 OK OR	97016	503-72	18-3103	
(Mailing ac	ddress)		(City)	(State)	(Zip)	(Phone #)	
hereby	assign <u>all</u>	my inter	est in and to app	lication/pe	rmit/transfer;			
•	_		<u>est</u> in and to a <u>per</u> showing the por	-		-	ned.)	
-			<i>my interest</i> in ar			-)
Application #	6/5	221	, Permit #	6-139	93; Trans	sfer #	MAY 2 7 2009	
GR Statement	:#		, GR Certific	<i>-OK-</i> ate of Regi	stration #		WATER RESOURCES	
			r Resources Dire				SALEM, OREGON	
Brad	Afore	1 1	. Lynco	i e	Che	ry/L.	-980-3905	
(Name of Nev	v Owner)	,	// .	/				
Mailing add	× //	4	Hermis	ton OF	778.	38 _ 541	-980-3905	
(Mailing addi	ress)		(City)	(510	ile) (Zip)	(Frione #)		Ž
NOTE:	Certifica	te of Gro	owners of the pround Water Reging addresses and	stration, yo	u must provid		mit, Transfer or and are owners'	5.28.200
I hereby certify or Certificate of	y that I ha	ve notifi	ed all other owner his request for as	ers of the pressignment.	roperty descri	bed in this Appl	ication, Permit	
Witness my ha	and this	21	_day of	<u> </u>	, 20 <u>09</u>			Y
	A	Applican	day of	- Kn	my next	hell		
	A	Applican	t/Permit holder () a	san)	D Thu	W	
DO M	or wor	. INI TII	IC DOV					

DO NOT WRITE IN THIS BOX

Oregon Water Resources Department effective 8:00 a.m. on date of receipt at Salem, Oregon. Fee receipt # 46 5 75
For Director by Jerry Sauter Program thalyst in Water Rights Division

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