

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	ch right will	be requi	red.		
I, Joseph Toelle & Autum (Name of Party Requesting						
71735 Turnout Rd	Burns		OR	97720	541-573-7830	
(Mailing Address)		(City)	(State)	(Zip)	(Phone #)	
hereby request assig	gnment of a portion	of application	on/permit		transfer to be assigned.)	
I have attached proof of owners of a land sales contract, a court Department cannot accept a cop	order or decree, doc y of a tax statement	umentation (of survivo	orship of pr	operty held jointly. The	y y
Application # G-16128	; Permit #(G-15713	; Tra	nsfer#		EIVED
GR Statement #	_; GR Certificate o	rk- f Registratio	n #			
					JUL :	2 1 2009
Donna Stovall & Robert Do (Name of Permit/Transfer I	Holder of Record)	_			WATER RESC	OURCES DEPT
(Previous) 71735 Turnout F	2d	Burns	OR	97720	Unknown SALEM,	OREGON
(Mailing Address)		(City)	(State)		(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. 2) I have the legal right to request assignment under OAR 690-310-0280 and 690-320-0060. 3) I have not been able to contact the owner(s) of record for the above referenced application or water right. 4) I further certify that the information provided herein is true and correct to the best of my knowledge. Witness my hand this						Sy Presse
- This certifies assignment and re Oregon Water Resources Depart 8:00a.m. on date of receipt at Sa - Fee receipt # 77225 - For Director by Jerry Saurer, Pr Water Rights Division	ecord change at ment effective em, Oregon.	n n	<i>iust</i> be su		nest for Assignment form the Department along with	h

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