

## **Request for Assignment**

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

PO Box 1270	Sisters	OR	97759	541-549-1248	
(Mailing address)	(City)	(State)	(Zip)	(Phone #)	
(Manning additions)	(City)	(Diaic)	(Lip)	(1 none m)	SPACE
hereby assign <u>all my</u>	<u>interest</u> in and to app	lication/pe	rmit/transfer;		RECEI
hereby assign all my	interest in and to a po	ortion of a	oplication/per	mit/transfer;	JUN 18
(You must include a	map showing the por	tion of the	application/p	ermit to be assigned	d)
					SALEM, O
hereby assign <u>a portio</u>	<u>n oj my interest</u> in at	ia to the <u>er</u>	<u>itire</u> application	on/permit/transfer;	
Application # G-15861	, Permit # G	-15788	; Trans	sfer #	
CD Co	an a via	-OR-	•• .		
GR Statement #	, GR Certific	ate of Reg	istration #		
	Vater Resources Dire	ctor, to:		•	
		-	es and Judith I	•	
as filed in the office of the V		-	es and Judith I	•	
as filed in the office of the V Willows Properties, an Oreg (Name of New Owner)		-	es and Judith I	Knapp	1248
as filed in the office of the W Willows Properties, an Oreg (Name of New Owner)	on general partners	of Jame		Knapp	1248
as filed in the office of the V Willows Properties, an Oreg (Name of New Owner)  PO Box 1270 (Mailing address)  NOTE:  If there are of Certificate of names and new Owners are contained to the c	Sisters (City) other owners of the properties of Ground Water Regionalling addresses and	OR (Statement of James)	9775: ate) (Zip) cribed in this ou must provide to this form.	Knapp  9 541-549- (Phone #)  Application, Permit de a list of all other	t, Transfer or owners'
as filed in the office of the V Willows Properties, an Oreg (Name of New Owner)  PO Box 1270 (Mailing address)  NOTE: If there are of Certificate on names and not not the control of the V I hereby certify that I have not the visit of the V  I hereby certify that I have not the V  Note: V  N	Sisters (City) other owners of the professional Water Regulating addresses and notified all other owners of the professional continuous continu	OR (Statement of James) (State	9775:  ate) (Zip)  cribed in this ou must provide to this form.	Knapp  9 541-549- (Phone #)  Application, Permit de a list of all other	t, Transfer or owners'
as filed in the office of the Willows Properties, an Oreg (Name of New Owner)  PO Box 1270 (Mailing address)  NOTE: If there are of Certificate of names and not not Certificate of Registration  Witness my hand this 13-	Sisters (City)  ther owners of the properties of the properties and the properties of the properties o	OR (Statements) (S	9775: ate) (Zip) cribed in this ou must provid to this form. property descri-	Standard Sta	t, Transfer or owners'
as filed in the office of the Willows Properties, an Oreg (Name of New Owner)  PO Box 1270 (Mailing address)  NOTE: If there are of Certificate of names and not not Certificate of Registration  Witness my hand this 13-	Sisters (City)  ther owners of the proposition of the particle all other owners of the proposition of this request for a	OR (Statements) (S	9775: ate) (Zip) cribed in this ou must provid to this form. property descri-	Standard Sta	t, Transfer or owners'

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 #83177

For Director by Jerry Saute Water Rights Division

submitted to the Department along with the appropriate recording fees:

- \$25 for the first page, and
- \$5 for each additional page. [as required by ORS 536.050(1)(d)]