

Request for Assignment

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

	n c of Applicant / Pe	rmit / Transfer Hold	der)		
P.O. Box 697		Shady Cove	OR	97539	(541) 531-2787
(Mailing ad	ldress)	(City) (.	State)	Zip)	(Phone #)
hereby	assign <i>all my inte</i>	rest in and to applic	ation/perr	nit/transfer;	
		rest in and to a port showing the portion			
hereby a	assign <i>a portion of</i>	my interest in and	to the <u>enti</u>	re application/	permit/transfer;
Application # <u>R-86979</u>		, Permit # <u>R 14</u>	, Permit # R 14319 ; Transfer #		r#
PremierWest (Name of New P.O. Box 40		Medford	OR	97501	(541) 282-5289
(Mailing addr	ress)	(City)	(Stat		(Phone #)
, ,		,	,	,	•
NOTE:	Certificate of Grand maili	ound Water Registr ng addresses and a	ation, you	must provide of this form.	plication, Permit, Transfer or a list of all other owners'
I hereby certif	Certificate of Gr names and mailing that I have notifi	ound Water Registr ng addresses and a	ation, you ttach it to of the pro	must provide of this form.	

DO NOT WRITE IN THIS BOX

- This certifies assignment and record change at Oregon Water Resources Department effective

8:00a.m. on date of receipt at Salem, Oregon.

- Fee receipt # 98(0)

- For Director by Jerry Sayler, Program Analyst in

Water Rights Division

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

RECEIVED

OCT 05 2009

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Last updated: June 1, 2007

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WATER RESOURCES DEPT SALEM, ORECON