



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, Ron Boehm
 (Name of Applicant / Permit / Transfer Holder)

P.O. Box 697 Shady Cove OR 97539 (541) 531-2787
 (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 # S-84706 , Permit # S 53818 ; Transfer # _____

-OR-

GR Statement # _____ , GR Certificate of Registration # _____

RECEIVED

as filed in the office of the Water Resources Director, to:

OCT 19 2009

Scott Valley Bank
 (Name of New Owner)

WATER RESOURCES DEPT
 SALEM, OREGON

P.O. Box 69 Yreka CA 96097 (530) 842-5701
 (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 29 day of Sept, 2009.

Applicant/Permit holder _____

Applicant/Permit holder _____

ASSIGNMENT
 P.H.D. 10.19.2009

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 # 9828
 - 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.

Attachment to Request for Assignment
Permit: S 53818

Additional property owners described in Permit:

Scott Valley Bank
P.O. Box 69
Yreka, CA 96097

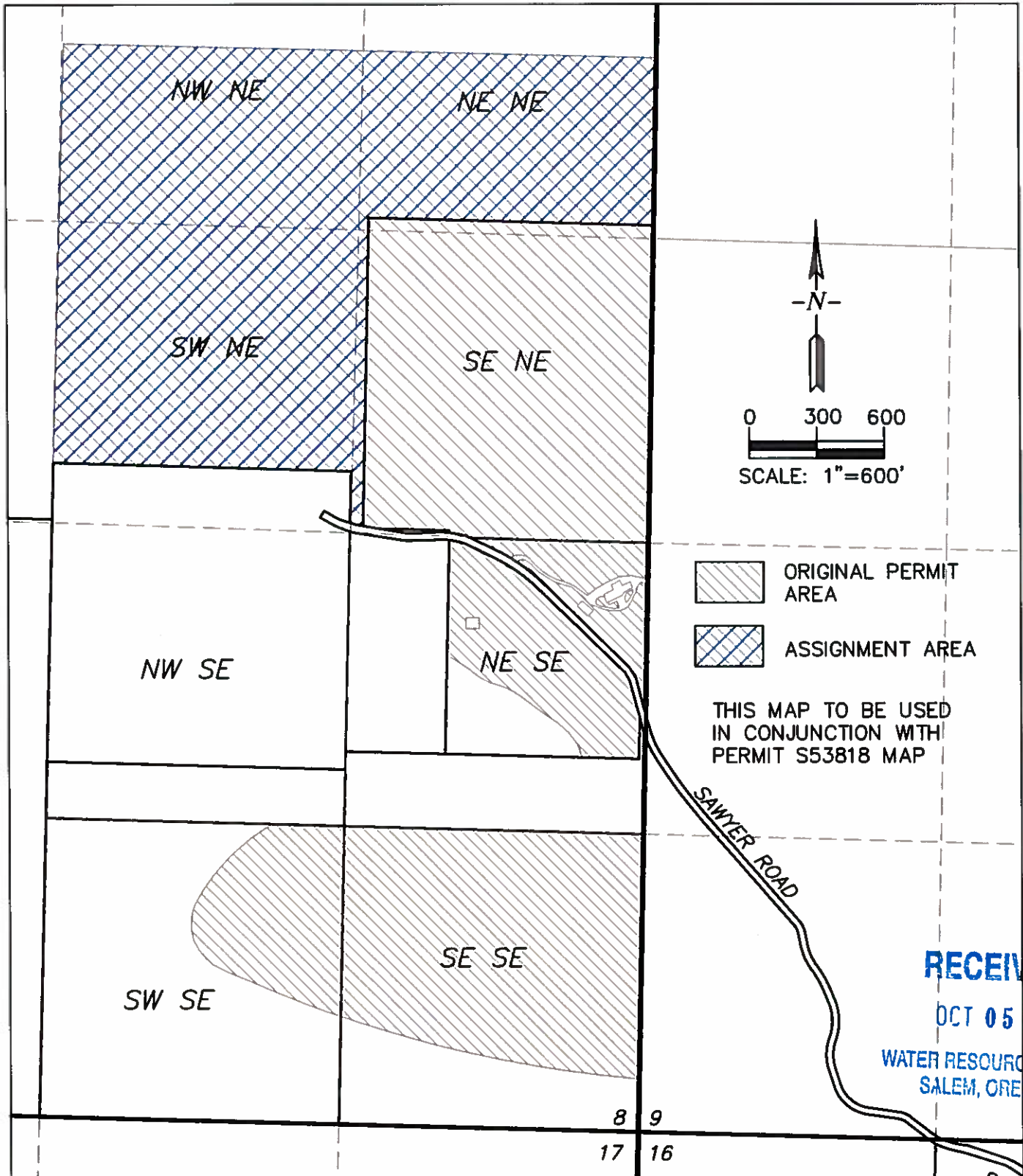
Walker Study Center
20462 Sawyer Road
Shady Cove, OR 97539

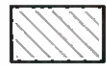

New Hope, LLC
388 State Street, Suite 420
Salem, OR 97301

RECEIVED

OCT 05 2009

WATER RESOURCES DEPT
SALEM, OREGON



-  ORIGINAL PERMIT AREA
-  ASSIGNMENT AREA

THIS MAP TO BE USED
IN CONJUNCTION WITH
PERMIT S53818 MAP

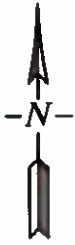
RECEIVED
OCT 05 2009

WATER RESOURCES DEPT
SALEM, OREGON

PW Public Works
Management, Inc.
171 SOUTH SECOND ST, CENTRAL POINT, OR 97520
(541) 665-5233
JOE STRAHL, P.E. AND C.W.R.E. (541) 301-2946
JEFF BALLARD, P.E. (541) 301-1555
EVAN MALEPSY, P.E. AND C.W.R.E. (541) 621-2868

REQUEST FOR ASSIGNMENT PERMIT: S 53818

AUGUST 2009



0 300 600
SCALE: 1"=600'

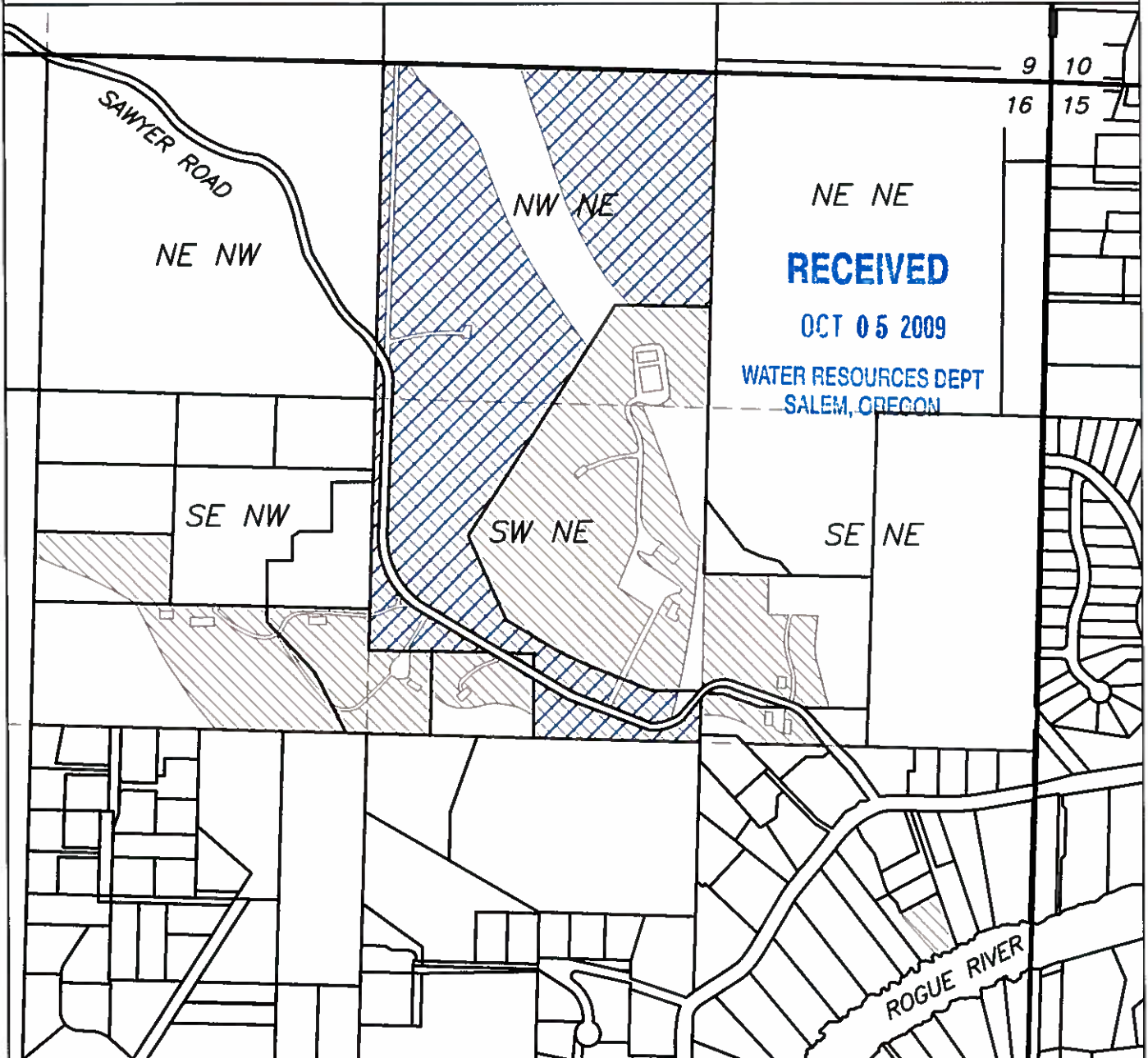


ORIGINAL PERMIT AREA



ASSIGNMENT AREA

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REQUEST FOR ASSIGNMENT PERMIT: S 53818

AUGUST 2009

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