

Request for Assignment

If for multiple rights, a separate form and fee for each right will be required. DEC 0 6 2006 I, JAMES D. THOMPSON & SCOTT D. WALTERS (Name of Applicant / Permit / Transfer Holder) WATER RESOURCES DEPT SALEM, OREGON 29525 NW CHALMERS LANE, CORNEUS OR (Mailing address) (City) (State) (50<u>3) 357-4666</u> (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 # <u>S-80130</u>, Permit # <u>52024</u>; Transfer # GR Statement # _____, GR Certificate of Registration # _____ as filed in the office of the Water Resources Director, to: ZELENIKA WEST, LL-C Assignee of TWNS Acquisition LLC (Name of New Owner) 29525 NW CHALMEDS LANS, LOWNELIUS Ou. AS 1604 MJ. 12/6/206 (Mailing address) **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. day of 100, .2006 Witness my hand this Applicant/Permit holder Applicant/Permit holder Scott D. DO NOT WRITE IN THIS BOX The completed "Request for Assignment" form must be submitted to the Department along with the appropriate - This certifies assignment and record change at Oregon Water Resources Department effective recording fees: ■ \$25 for the first page, and 8:00a.m. on date of receipt at Salem, Oregon. - Fee receipt # **8552** * \$5 for each additional page. - For Director by Jerry Saute Program

Water Rights Division

[as required by ORS 536.050(1)(d)]