

Request for **Assignment**

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

I, James D. Thompson	
(Name of Applicant / Permit / Transfer Holder)	
29525 NW CHALMERS LANG, CARLELIUS, OR 97113	
(Mailing address) (City) (State) (Zip) (Phone #)	RECEIVE
hereby assign all my interest in and to application/permit/transfer;	DEC 0 6 2006
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.)	WATER RESOURCES D SALEM, OREGON
hereby assign a portion of my interest in and to the entire application/permit/transfer;	
Application # 4-14503 , Permit # 3-13357 ; Transfer # -OR-	
GR Statement #, GR Certificate of Registration #	,
as filed in the office of the Water Resources Director, to:	
(Name of New Owner)	
29525 NW CHALMERS LANE, CORNELIUS OR 97113 1-800-873-5	5513 LQ
(Mailing address) (City) (State) (Zip) (Phone #)	
NOTE: If there are other owners of the property described in this Application, Permit, To Certificate of Ground Water Registration, you must provide a list of all other own 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 or Certificate of Registration of this request for assignment.	ı, Permit
Witness my hand this 21 day of NOV 2000	. //.
Applicant/Permit holder	,
James D. Thompson	
Applicant/Permit holder	
The completed "Request for Assignment" form submitted to the Department along with the spp. 100 m. on date of receipt at Salem, Oregon. Fee receipt # 85524	must be topriate
- For Director by Jerry Sandr, Program analyst in Water Rights Division - Wate	