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, David J. Blatchford and Chelsea C. Blatchford, a married couple

(Name of Applicant / Permit / Transfer Holder / License Holder/GR Certificate of Registration)

44189 Brown Road   Baker City   OR   97814   541-519-8315
(Mailing Address)   _(City)   (State) (Zip)   (Phone #)_

☑ hereby assign _all my interest_ in and to application/permit/transfer/license/GR Certificate of Registration;

☐ hereby assign _all my interest_ in and to a portion of application/permit/transfer/license/GR Certificate of Registration; _(You must include a map showing the portion of the application/permit/transfer/license/GR Certificate of Registration to be assigned.)_

☐ hereby assign _a portion of my interest_ in and to the _entire_ application/permit/transfer/license/GR Certificate of Registration:

Application # G-14249   ; Permit # G-12887   ; Transfer #_____
                                          -OR-
License #_____ ; GR Statement #_____ ; GR Certificate of Registration #_____

RECEIVED

JAN 1 5 2010

WATER RESOURCES DEPT
SALEM, OREGON

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

Northwest Farm Credit Services, FLCA & David J. Blatchford & Chelsea C. Blatchford, a married couple
(Name of New Owner)

P.O. Box 698 & 44189 Brown Rd   Baker City   OR   97814   541-524-2920
(Mailing Address)   _(City)   (State) (Zip)   (Phone #)_

Note: If there are other owners of the property described in the Application, Permit, Transfer, License, or GR Certificate of 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, Transfer, License, or GR Certificate of Registration of this Request fo. Assignment

Witness my hand this ___12th___ day of ___January___, 20 1Y.

Applicant/Permit Holder x_____
                              David J. Blatchford

Applicant/Permit Holder _____
                              Chelsea C. Blatchford

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 # 97003
- For Director by Jerry Sauter, Program Analyst in Water Rights Division

The completed "Request for Assignment" form _must_ be submitted to the Department along with the recording fee of $75.

Last updated: August 21, 2009   _Request for Assignment_   WR