REQUEST FOR ASSIGNMENT

I, Robert Grail (Name of Applicant / Permit / Transfer	Holder)		
7/209 Turnout Rd Bu		97720	<u>573 - 75/5</u> (Phone #)
(mailing address) (City)	(State)	(Zip)	(Phone #)
CHECK ONE			
⊠hereby assign all my interest in a	nd to application/perr	nit/transfer;	
hereby assign <u>all my interest</u> in an (You must include a map showing t assigned.)			
□hereby assign <u>a portion of my int</u> transfer;	e <u>rest</u> in and to the <u>e</u>	ntire application	n/permit/
Application # <u>6-16207</u> , Pern	nit # <u>6 15816</u>	, Transfer #	
GR Statement #	- <i>OR-</i> , GR Certificate of l	Registration #	
		togiou auton n	,
as filed in the office of the Water Reso (Name of New Owner)	urces Director, to:		
	00	~~~	
(City) (City)	OR 9 (State)	(Zip) 52/	<u>/- 620~0666</u> (Phone #)
NOTE: If there are other owners Permit, Transfer or Certif provide a list of all other attach it to this form.	icate of Ground Wate	er Registration,	you must
I hereby certify that I have notified all of Application, Permit or Certificate of Re	-	•	6.7 (8)
Witness my hand this day o	Decamber 1	, 20 <i>06</i>	
Applicant/Permit h	older Notes	11 Coras	
Applicant/Permit h	older	<u> </u>	
DO NOT WRITE IN THIS BOX	The completed "Re must be submitted		
- This certifies assignment and record change at Oregon Water Resources Department effective 8:00a.m. on date of receipt at Salem Oregon Fee receipt # 25 727 - For Director by Jerry Sayer, Program Analyst in	 \$25 for the first \$5 for each ad [as required by ORS] 	te recording feet to page, and lditional page. 5 536.050(1)(d)]	DEC 2 6 2006 WATER RESOURCES DEF SALEM, OREGON
Water Rights Division	WATER RESOUR		

WATER RESOURCES DEPARTMENT 725 SUMMER STREET NE, SUITE A SALEM, OREGON 97301-1271