

Request for

AFR 2 2 2011

Assignment

WATER RESOURCES DEPT SALEM, OREGON

By Proof of Ownership

(If Water Right Holder is Not Available	e)
If for multiple rights, a separate form and fee for each right will be required.	
I, Norman R. Foley (Name of Party Requesting Assignment)	
(City) (State) (Phone #)	471-1422
(Mailing Address) (City) (State) (Zip) (Phone #)	
hereby request assignment of application/permit/transfer/license/GR Certificate of Registratio	n;
hereby request assignment of a <u>portion</u> 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.)	of
I have attached proof of ownership that may include but not be limited to: a copy of the deed to the land of a land sales contract, a court order or decree, documentation of survivorship of property held jointly. Department cannot accept a copy of a tax statement.	
Application # <u>S - 102052</u> ; Permit # <u>5 - 46132</u> ; Transfer#;	
-OR- License # GR Statement #; GR Certificate of Registration #	RECEIVED
	——————————————————————————————————————
(Name of Holder of Record)	
300 THE TREES DR WILLIAMS OR 97544	VATER RESOURCES DEPT
(Mailing Address) (Mailing Address) (City) (State) (Zip) (Phone #)	SALEM, OREGON
Note: You are required to furnish proof acceptable to the Department that notice of the assignment has given or attempted for each identified property owner not a party to the assignment. ORS 537. Failure to submit this proof will result in the return of your request. (Proof may include but not limited to: a copy of returned certified mailing, copy of a Death Certificate, or a court order.) 1) I certify that I am the current owner of the property described in this application, Permit, transflicense or GR Certificate of Registration. 2) I have the legal right to request assignment under OAR 690-310-0280 and 690-320-0060. 3) I have not been able to contact the owner(s) of record for the above referenced application or veright. 4) I further certify that the information provided herein is true and correct to the best of my know Witness my hand this	as been 220(2) X2 O S fer, Little S Value S vater S Value S Value S vater S Value S Valu
DO NOT WRITE IN THIS BOX	
- This certifies assignment and record change at	

form must be submitted to the Department

COPY TO: BETTY JEAN BOLCH
RICK PARKINSON

along with the recording fee of \$75.

Oregon Water Resources Department effective

8:00a.m. on date of receipt at Salem, Oregon.

- Fee receipt # 101867 - For Director by Jerry Sauton

Water Rights Division