

Oregon Water Resources Department

725 Summer Street NE, Suite A Salem Oregon 97301-1266 (503) 986-0900 www.wrd.state.or.us

REQUEST FOR ASSIGNMENT

BY PROOF OF OWNERSHIP (IF PERMIT/TRANSFER HOLDER IS NOT AVAILABLE)

Delma Heiple	<u></u>			
(Name of Party Requesting Assignment	ent)			
80490 Umatilla River Road	Hermiston,	OR	97838	(541)289-4495
(Mailing address)	(City)	(State)	(Zip)	(Phone #)
CHECK ONE				RECEIVED
				JAN 3 0 2012
☐hereby request assignment (You must include a map I have attached proof of own land, a copy of a land sales of property held jointly;	showing the portion of ership that may inclu	f <i>the application/_l</i> ude but not be l	oermit/transfer to imited to: a cop	o be assigned,)OREGON by of the deed to the
Application #	, Permit#	, т	ransfer # <u>T-76</u>	684 Vol. 53 P. 1386
		-OR-		
GR Statement #	, GR Ce	rtificate of Re	gistration #	
Robin L. Walling Revocble Living Tr (Name of Permit/Transfer Holder of Re		ee		
80490 Umatilla River Road	Hermiston.	OR	97838	(541)289-4495

NOTE:

(Mailing address)

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.

(State)

I hereby certify that I have notified all owners of the property described in this Application, Permit of Certificate of Registration of this request for assignment.

Witness my hand this

(City)

Party Requesting Assignment

(Zip)

(Phone #)

Party Requesting Assignment

DO NOT WRITE IN THIS BOX

This certifies assignment and record change at Oregon Water Resources Department effective 8:00 a.m. on date of receipt at Salem, Oregon. Fee receipt # 104948 For Director by Jerry Saute

Water Rights Division

The completed "Request for Assignment" form must be submitted to the Department along with the appropriate recording fees:\$75

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