

Request for Assignment

RECEIVED

JUN 5 2012

If for multiple right	s, a separate form and	l fee for each right w	vill be required.

WATER RESOURCES DEPT NC

(Na	me of Applicant /	Permit / Transfer Holde	er / License Ho	lder/GR	Certificate	of Registration)
O Box	x 157		St. Paul	OR	97137	503-633-2941
(Ma	iiling Address)		(City)	(State)	(Zip)	(Phone #)
	hereby assign <u>aa</u> Registration;	<i>II my interest</i> in and to a	pplication/perm	nit/transfe	er/license/C	GR Certificate of
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Applica	tion #	; Permit #		; 7	Transfer#	T-10275
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			-OK-			
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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 # 10 90

- 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.