

Request for **Assignment**

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AUG 02 2013

SALEM, OR

f for multiple rights, a separate form and fee for	each right will be	e required.			
(Name of Applicant / Permit / Transfer Hold					
(Name of Applicant / Permit / Transfer Hold	er / License Hold	der/GR Cei	rtificate of	Registration)	
(Mailing Address)	Arlington	OR G	17812	(541)454-	
(Mailing Address)	(City)	(State) (Z	Zip)	(Phone #)	
hereby assign <u>all my interest</u> in and to a Registration;	pplication/permi	t/transfer/l	license/GR	Certificate of	
hereby assign <u>all my interest</u> in and to a of Registration; (You must include a ma application/permit/transfer/license/GR apples to the second point hereby assign <u>a portion of my interest</u> in Certificate of Registration:	p showing the po Certificate of Reg LCF 2016	ortion of the gistration (he to be assign or 13 6 0	ned) This assign	nme S
pplication # 6 / 4 8 + C ; Permit # 6	13748 -OR-	; Trai	nsfer#		_
icense #; GR Statement #	; GR	Certificat	te of Regist	ration #	_
s filed in the office of the Water Resources Dire	ector, to:				
(Name of New Owner)					
20062 11:1 1111	P.H.	1 00 9	7176	(503) 100 -	<u>-11</u>
Rock Creek Crossing (Name of New Owner) 20982 NW M. II Comb (Mailing Address)	(City)	(State) (2	1227 Zip)	(Phone #)	<u> </u>
					_
Note: If there are other owners of the property of GR Certificate of Registration, you must addresses and attach it to this form.					
I hereby certify that I have notified all other of Permit, Transfer, License, or GR Certificate					tore THE
Witness my hand this day o	f	^ 	, 20 13	_•	9
Applicant/Permit Holder		5/4	-a	U	3
Application critic Holder		/ .			

Fee receipt # <u>ICR 485</u>
For Director by Jerry Sautor
Water Rights Division

Dregon Water Resources Department effective

3:00 a.m. on date of receipt at Salem, Oregon.

The completed "Request for Assignment"

form must be submitted to the Department

along with the recording fee of \$75.