

Request for Assignment

By Proof of Ownership (If Water Right Holder is Not Available)

If for multiple rights, a separate form and fee for each right will be required.

39 Hook RD NE	Mt. Angel	OR	97362	503-932-2504
Mailing Address)	(City)	(State)	(Zip)	(Phone #)
hereby request assignment of ap	plication/permit/transfe	er/license	/GR Certif	icate of Registration;
hereby request assignment of a Registration; (You must include application/permit/transfer/licenter)	a map showing the por	tion of th	ie	
ve attached proof of ownership that n land sales contract, a court order or d artment cannot accept a copy of a tax	lecree, documentation of			
lication # G-16140 ; Per	mit # G-15742	; ٦	ransfer# _	NA
nse # NA GR Statement #	- <i>OR</i> -	Certifica	te of Regis	stration #NA
rence Schmidt				
(Name of Holder of Record)				
31 Howell Prairie Rd NE	Silverton		97381	
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)
ote: You are required to furnish proof given or attempted for each iden	tified property owner n	ot a party	to the ass	ignment. ORS 537.220(2)
Failure to submit this proof will limited to: a copy of returned ce. 1) I certify that I am the current ow license or GR Certificate of Reg. 2) I have the legal right to request a significant that I have not been able to contact the right.	rtified mailing, copy of mer of the property descistration. assignment under OAR	a Death cribed in	Certificate this applicate 0280 and	ation, Permit, transfer,
limited to: a copy of returned center limited to: a copy of returned center license or GR Certificate of Reg I have the legal right to request a I have not been able to contact the right. 4) I further certify that the information	rtified mailing, copy of mer of the property descistration. assignment under OAR ne owner(s) of record for tion provided herein is	a Death cribed in 690-310 or the about true and crite an	Certificate this applicate 0280 and over reference correct to the	ation, Permit, transfer, 590-320-0060. ced application or water ne best of my knowledge.
limited to: a copy of returned center of the license or GR Certificate of Reg 2) I have the legal right to request a 3. I have not been able to contact the right. 4) I further certify that the information of the limited in the li	rtified mailing, copy of mer of the property descistration. assignment under OAR ne owner(s) of record for tion provided herein is	a Death cribed in 690-310 or the about true and crite an	Certificate this applicate 0280 and over reference correct to the	ation, Permit, transfer, 590-320-0060. ced application or water ne best of my knowledge.
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The completed "Request for Assignment"

form must be submitted to the Department

along with the recording fee of \$75.

WR

SALEM, OREGON

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 # [1073] [107]

For Director by Jerry Saut Water Rights Division