

Request for Assignment

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SEP 2 3 2014

SALEM, OR

If for multiple rights, a separate form and for	ee for each right will be required.	3. (22,11), 3.
I, Mount Vernon School (School Distric	t 3)	
(Name of Applicant / Permit / Transfer	Holder / License Holder/GR Certificat	e of Registration)
401 N. Canyon Blvd.	Canyon City OR 97820	(541) 575-1280
(Mailing Address)	(City) (State) (Zip)	(Phone #)
hereby assign <u>all my interest</u> in an Registration;	nd to application/permit/transfer/license/	GR Certificate of
of Registration; (You must include	nd to a portion of application/permit/trange a map showing the portion of the e/GR Certificate of Registration to be as	
hereby assign <u>a portion of my inte</u> Certificate of Registration:	rest in and to the entire application/perr	nit/transfer/license/GR
Application # S-57592 ; Permi	t #; Transfer #	
Application #	-OR- · GR Certificate of Re	gistration #65893
		gistration #
As filed in the office of the Water Resource	es Director, to:	
Oregon Telephone Corporation (Name of New Owner)		
•		
P.O. Box 609 (Mailing Address)	Mt. Vernon OR 97865 (City) (State) (Zip)	(541) 932-4411
(11-11-12)	(City) (State) (Zip)	(Phone #)
Note: If there are other owners of the prop GR Certificate of Registration, you addresses and attach it to this form	must provide a list of all other owners'	it, Transfer, License, or names and mailing this Application, Assignment
I hereby certify that I have notified all of Permit, Transfer, License, or GR Certification.	icate of Registration of this Request for	n this Application, Assignment
Witness my hand this	day of September, 2014	
Applicant/Permit Holde	mut w. Wil	9
Applicant/Permit Holde	r	2
DO NOT WRITE IN THIS BOX	The completed "Request for A form <i>must</i> be submitted to the along with the recording fee of	Department