## **REQUEST FOR ASSIGNMENT**

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

John Roth	1 J& K F	TEMAS		The same and the same of
(Name of Party Requesting		<u> </u>		
Po box 362	Bandon	OR	97411	541-297-6292
(Mailing address)	(City)	(State)	(Zip)	(Phone #) RECEIVED
CHECK ONE				
☐hereby request as	ssignment in and to applica	tion/permit/transf	er;	APR 28 2005
☐hereby request as	ssignment in and to a <i>portl</i> e	on of application/	permit/transfer;	WATER RESOURCES DE SALEM, OREGON
(You must include	e a map showing the portion	of the application	n/permit/transfer t	o be assigned.)
the land, a copy of a property held jointly (Remember to inc	clude \$5 for each additions	art order or decree	e, documentation	
Application # <u>G/453</u>	38 1 Permit #	613595	, Transfer #	
GR Statement #	-0	<i>R-</i> ficate of Registra		
Francis Cla	del			<del></del>
(Name of Permit/Transfer H	lolder of Record)			
313 040 A	rs SE Bander (City)	OR ·	9744	297-2347 8 (Phone #)
(Mailing address)	(City)	(State)	(Zip)	(Phone #)
or Certific	re other owners of the properate of Ground Water Register names and malling addre	stration, <mark>you mus</mark>	t provide a list o	
	ave notified all other owners Registration of this request		described in this A	Application,
Witness my hand this _	day ofApr.	<u>. )</u> , 20 <u> </u> છ	<u>5</u> .	
Party Requesting	g Assignment	1 Kob		0 /
Party Requesting	g Assignment			
DO NOT WRITE I	N THIS BOX	must be submitt	Request for Assigned to the Department	
		the appropriate	recording tees:	

This certifies assignment and record change at Oregon Water Resources Department effective 8:00a.m. on date of receipt at Salem, Oregon.

8:00a.m. on date of receipt at Salem, Oregon.
- Fee receipt # 74262///

- For Director by Jerry Saylor, Program Analyst in Water Rights Division

- + \$25 for the first page, and
- ◆ \$5 for <u>each</u> additional page. [as required by ORS 536.050(1)(d)]

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