NOV 03 2014



Request for **Assignment**

SALEM, OR

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

_		sting Assigi	ŕ						
74-48	Roave	RIVER	DR.	SUADY	Cove	OR (Zin)	97539 (Phone #)	541	878-396
(Matting)	Auuressj			(Cuy)	(State)	(Zip)	(Pnone #)		
M hereb	by request ass	signment of	application	permit/transfe	er/license/C	GR Certif	icate of Registrati	on;	
Regi	stration; (You	ı must inclı	ıde a map sh	f application/powing the por ertificate of R	tion of the		se/GR Certificate	of	
f a land sales		ourt order o	or decree, do	cumentation of			the deed to the la operty held jointly		
application #	5-811	73 ; 1	Permit #_ S	-53364	<u>L;</u> Tr	ansfer#_			
icense #	G	R Statemer	 nt #	<i>OR-</i> : GR	Certificate	e of Regis	stration #		
(Name of	Holder of Re	ecord)	. Wou						-
(Mailing)	Address)	VGC (2)	<u> </u>	(City)	(State)	(Zip)	(Phone #)		-
given	or attempted or or attempted or	for each ic his proof w	lentified pro vill result in t	perty owner nather return of y	ot a party t our reques	o the assi	of the assignment of the assignment. ORS 537 may include but no or a court order.	7.220(2) 10t be	
limite 1) I certilicens 2) I have	ify that I am t se or GR Cert e the legal rig	ificate of R ht to reque	legistration. st assignmen	t under OAR	690-310-0	280 and 6	ation, Permit, tran 590-320-0060.		A09
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