



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301
 (503) 986-0900
 www.wrd.state.or.us

Request for Assignment

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

± We, Echo Irrigation District And Hale Farms, LLC

(Name of Applicant / Permit / Transfer Holder / License Holder/GR Certificate of Registration)

73120 Highway 207
(Mailing Address)

Echo OR 97826 (541) 376-5055
(City) (State) (Zip) (Phone #)

- hereby assign all my interest in and to application/permit/transfer/license/GR Certificate of Registration;
- hereby assign all our interest in and to a portion of application/permit/transfer/license/GR Certificate of Registration; *(You must include a map showing the portion of the application/permit/transfer/license/GR Certificate of Registration to be assigned.)*
- hereby assign a portion of my interest in and to the entire application/permit/transfer/license/GR Certificate of Registration;

RECEIVED BY OWRE

MAR 09 2015

SALEM, OR

Application # S-87076 ; Permit # S-54773 ; Transfer # _____
 -OR-

License # _____ ; GR Statement # _____ ; GR Certificate of Registration # _____

As filed in the office of the Water Resources Director, to:

APPLICANT/BUSINESS NAME JJG FARMS LLC			PHONE NO. 503-663-1226	ADDITIONAL CONTACT NO. 503-970-7013
ADDRESS PO Box 610			FAX NO.	
CITY Gresham	STATE OR	ZIP 97030-0155	E-MAIL rgutensohn@me.com	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				
APPLICANT/BUSINESS NAME Wendy Lavender			PHONE NO. 780-435-0192	ADDITIONAL CONTACT NO. 780-777-3877
ADDRESS 11923 NW 28th Avenue			FAX NO.	
CITY Edmonton	STATE Alberta, Canada	ZIP T6J 6C1	E-MAIL lakeladywdl@gmail.com	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				
APPLICANT/BUSINESS NAME Connie Caplinger			PHONE NO. 541-376-8455	ADDITIONAL CONTACT NO.
ADDRESS 75228 Coppinger Lane			FAX NO.	
CITY Echo	STATE OR	ZIP 97826	E-MAIL bccaplinger@gmail.com	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

Allison P...
 2/10/15

Note: If there are other owners of the property described in the Application, Permit, Transfer, License, or GR Certificate of Registration, you must provide a list of all other owners' names and mailing addresses and attach it to this form.

I hereby certify that I have notified all other owners of the property described in this Application, Permit, Transfer, License, or GR Certificate of Registration of this Request for Assignment

Witness my hand this _____ day of _____, 20____.

Applicant/Permit Holder Echo Irrigation Dist.
by: [Signature]

Applicant/Permit Holder [Signature]
by: [Signature]

DO NOT WRITE IN THIS BOX

- This certifies assignment and record change at Oregon Water Resources Department effective 8:00a.m. on date of receipt at Salem, Oregon.
- Fee receipt # 115155
- For Director by Jerry Sauter, Program Analyst in Water Rights Division [Signature]

The completed "Request for Assignment" form *must* be submitted to the Department along with the recording fee of \$85.

Last updated: July 19, 2013

Request for Assignment

WR

RECEIVED BY OWRD

MAR 09 2013

SALEM, OR