

Request for Assignment

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

			•		
I. GARRETT RICE (Name of Applicant Permi	t Transfer Holder	License Ho	lder GR (Certificate	e of Registration)
P.O. Box 1704, Ben	d. Or. 97709		541-999	9-8706	
(Mailing Address)		(City)			(Phone #)
hereby assign <i>all my in</i> Registration;	<u>terest</u> in and to appli	ication/pern	nit/transfe	er/license/	GR Certificate of
hereby assign <u>all my in</u> of Registration; (You n application permit tran	nust include a map sh	howing the	portion of	f the	ssfer/license/GR Certificate
hereby assign <i>a portion</i> Certificate of Registrate		d to the <u>ent</u>	<u>ire</u> applic	ation/peri	mit/transfer/license/GR
Application #_S-86013	; Permit #_ 541	50	; 7	Transfer #	
License #; GR St	atement #	; C	R Certifi	cate of Re	egistration #
As filed in the office of the Wat	er Resources Directo	or, to:			
SILKE_TOWER_PROPERTIE (Name of New Owner) 680 Tyler Street, Eug					
(Mailing Address)			(State)	(Zip)	(Phone #)
Note: If there are other owner GR Certificate of Regis addresses and attach it	stration, <i>you must pro</i>				
I hereby certify that I have a Permit, Transfer, License, o					
Witness my hand this	day of			, 20	
Witness my hand thisApplicant/P	ermit Holder	Larre	1 20	, De	· Irelee
Applicant/P	ermit Holder				

DO NOT WRITE IN THIS BOX

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 # 1812
For Director by Jerry Sauter Program Smalyst
Water Rights Division

_Water Rights Division-

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

RECEIVED BY OWRD

NOV **2 5** 2015