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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.

Northwest Farm Credit Services, ACA

O Box 607	Redmond	Oregon, 97756	541-504-3500
(Mailing Address)	(City)	(State) (Zip)	
 hereby assign <u>all my interest</u> in an Registration; 	d to application/perm	it/transfer/license/0	GR Certificate of
hereby assign <u>all my interest</u> in an of Registration; (You must include application/permit/transfer/license	a map showing the p	ortion of the	
hereby assign <u>a portion of my inte</u> Certificate of Registration:	<u>rest</u> in and to the <u>entia</u>	<u>re</u> application/perm	it/transfer/license/GR
pplication # G-12177 ; Permi	t #_G-12561	; Transfer #_	
pplication #_G-12177 ; Permi icense #; GR Statement # _	- <i>OR</i> ; GI	R Certificate of Re	gistration #
s filed in the office of the Water Resource	es Director, to:		
homas G Strand			
(Name of New Owner)			
	Terrebonne		541-584-5747
(Name of New Owner) 8880 NW Lone Pine Lane (Mailing Address)	Terrebonne (City)		
8880 NW Lone Pine Lane	(City) perty described in the a must provide a list of	(State) (Zip) Application, Perm	(Phone #) it, Transfer, License, or
8880 NW Lone Pine Lane (Mailing Address) Note: If there are other owners of the prop GR Certificate of Registration, you	(City) perty described in the must provide a list of the owners of the pr	(State) (Zip) Application, Perm f all other owners'	(Phone #) it, Transfer, License, or names and mailing this Application,
8880 NW Lone Pine Lane (Mailing Address) Note: If there are other owners of the prop GR Certificate of Registration, you addresses and attach it to this form I hereby certify that I have notified all of Permit, Transfer, License, or GR Certif	(City) perty described in the a must provide a list of the owners of the pr ficate of Registration of	(State) (Zip) Application, Perm f all other owners' operty described in of this Request for	(Phone #) it, Transfer, License, or names and mailing this Application, Assignment
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DO NOT WRITE IN THIS BOX

This certifies assignment and record Oregon Water Resources Departmen 8:00 a.m. on date of receipt at Salem Fee receipt # [[57(2]] For Director by Jerry Sauer Program	t effective along with the recording	to the Department fee of \$85. RECEIVED BY OWRD
For Director by Jerry Sauer Program Water Rights Division		FEB 1 2 2016
Last updated: July 19, 2013	Request for Assignment	WR

SALEM, OR