

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.

3961 Barrett Dr	it / Transfer Holder / Hood	River OR 9	aer/GR C 07041	ertificate of Reg (541) A	istration)	
(Mailing Address)	(City)	(State) (.		(Phone #		
A hereby assign <i>all my int</i> Registration;	erest in and to applica	ation/permit/	transfer/li	cense/GR Certif	icate of	
hereby assign all my interpretent of Registration; (You n application/permit/transpli	nust include a map sh	owing the po	rtion of t	he	e/GR Certificate	
hereby assign a portion Certificate of Registrat	of my interest in and				r/license/GR	
Application # 6-16397	; Permit # <u>_G1597</u>	6	; Tr	ansfer #		_
		-OR-				
.icense #; GR St	atement #	; GR	Certifica	te of Registratio	n #	-
As filed in the office of the Wate	er Resources Director	, to:				
Northwest Form Credit Somions		D 04 110				
Northwest Farm Credit Services (Name of New Owner)				<u>lles, OR 97058</u> (State) (Zip)	(541) 298-3407 (Phone #)	
Middle Fork, LLC (Name of New Owner)	(Mailing Add			er, OR 97041 (State) (Zip)	(541) 490-4651 (Phone #)	
Registration, you must pro I hereby certify that I have n Permit, Transfer, License, on Witness my hand this Applicant/Permit Ho	to tified all other owned of Reference of Reference $\frac{19^{-44}}{19}$ da	ers of the properties of the p	perty desc this Requ	cribed in this Ap lest for Assignm	plication, ent	s form.
Applicant/Permit Ho Applicant/Permit Ho	Derek A. DeBord	le SA				
	Derek A. DeBord	le SA				
Applicant/Permit Ho DO NOT WRITE IN THIS B This certifies assignment and record Oregon Water Resources Departme 8:00 a.m. on date of receipt at sale	Derek A. DeBord older: Trenton D. Wese OX I change at nt effective	de man The cor form m	ust be sub	Request for Assi mitted to the Dec cording fee of \$	partment	
Applicant/Permit Ho <u>DO NOT WRITE IN THIS B</u> This certifies assignment and record	Derek A. DeBord older: Trenton D. Wese OX d change at nt effective n, Oregon.	de man The cor form m	ust be sub	omitted to the Decording fee of \$	partment	

SALEM, OR



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(Name of Applicant / Pe. <u>3961 Barrett</u> Dr	ina i i unsjer Holder /	License F	lolder/GR (Certificate of Reg	sistration)		
(Mailing Address)					(541) 490-4651		
(maning Address)	(City)	(State)	(Zip)	(Phone	#)		
hereby assign <i>all my</i> r Registration;	interest in and to applic	ation/perm	it/transfer/l	license/GR Certi	ficate of		
hereby assign all my in of Registration; (You application/permit/tr	nterest in and to a port a must include a map sh ransfer/license/GR Cert	howing the	portion of	the			
hereby assign a portion Certificate of Registre	on of my interest in and	to the <i>enti</i>	re applicati	on/permit/transfe	er/license/GR		
Application #	; Permit # <u>G1597</u>	76	; T	ransfer #			
		-OR-					
License #; GR	Statement #	; C	GR Certifica	ate of Registratio	n #		
				-			
As filed in the office of the W	ater Resources Director	r, to:					
Northwest Farm Credit Servic (Name of New Owner)	es, FLCA 3591 Klind (Mailing Ad		10 The Da (City)	alles, OR 97058 (State) (Zip)	(541) 298-3407 (Phone #)		
Middle Fork, LLC	3961Barrett D	r	Hood Riv	ver OP 07041	(541) 400 4(51		
(Name of New Owner)	(Mailing Add		(City)		(541) 490-4651 (Phone #)		
Note: If there are other owners Registration, you must p I hereby certify that I have Permit, Transfer, License, Witness my hand this Applicant/Permit H Applicant/Permit H	rovide a list of all other notified all other owned or GR Certificate of Re 20^{VL} d Holder: Jacon A. Taylor Holder: Derek A. DeBord	er owners' f ers of the p egistration ay of de	names and roperty des of this Req	<i>mailing addresse</i> cribed in this Ap	s and attach it to this form. plication, eent	te of	
DO NOT WRITE IN THIS	BOX	form	must be sul	Request for Assibilities for the Decording fee of \$	partment 85.		

Last updated: July 19, 2013

Request for Assignment

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SALEM, OR

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