

Request for Assignment

SALEM, OR

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

| If for multiple rights, a separate form and fee for | each right will | be required. | |
|--|---|--|--|
| Mark Kulper and Gina Kulper (Name of Party Requesting Assignment) | | | |
| 69440 Crooked Horseshoe Rd. | Sisters | OR 97759 | 503-686-9751 |
| (Mailing Address) | (City) | (State) (Zip) | (Phone #) |
| hereby request assignment of application | on/permit/transfe | er/license/GR Certi | ficate of Registration; |
| hereby request assignment of a <u>portion</u> Registration; (You must include a map application/permit/transfer/license/GR | showing the por | rtion of the | |
| I have attached proof of ownership that may inclose a land sales contract, a court order or decree, of a land sales contract a copy of a tax statem | documentation | | |
| Application #G-16290; Permit #G | i-16002 | ; Transfer# | |
| Application #G-16290; Permit #G | <i>-OR-</i> ; GR | Certificate of Reg | istration # |
| Laurene Fitzjarrell | | | |
| (Name of Holder of Record) | | | |
| 69440 Crooked Horseshoe Rd | Sisters | OR, 97759 | |
| (Mailing Address) | (City) | (State) (Zip) | (Phone #) |
| Note: You are required to furnish proof accept given or attempted for each identified p Failure to submit this proof will result a limited to: a copy of returned certified to: 1) I certify that I am the current owner of license or GR Certificate of Registratio 2) I have the legal right to request assignm 3) I have not been able to contact the own right. | oroperty owner r in the return of y mailing, copy of the property des n. nent under OAR er(s) of record f | not a party to the associated a party to the associated and a peath Certificated cribed in this application the above reference of the above reference and a party to the above reference of the above referen | signment. ORS 537.220(2) If may include but not be e, or a court order.) cation, Permit, transfer, 690-320-0060. nced application or water |
| 4) I further certify that the information pro | ovided herein is | true and correct to | the best of my knowledge. |
| Witness my hand this day | of Hugue | ,20/ | <u>6</u> . |
| Party Requesting Assignment | nt //m | V Ship | |
| Party Requesting Assignme | nt 76 | | |
| | | | |

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 #/21336
For Director by Jerry Sauter, Program Analyst in Water Rights Division

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