

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

Request for Assignment By Proof of Ownership

CIN

(If Water Right Holder is Not Available)

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

, ACMPC Oregon 2, LLC (dba Halls Fe	rry Farms)			
ACMPC Oregon 2, LLC (dba Halls Fe (Name of Party Requesting Assignment))			
P.O. Box 717	Jefferson	OR	97352	(541) 327-7853
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)
hereby request assignment of appli	cation/permit/transfe	er/license	/GR Certifi	cate of Registration;
hereby request assignment of a <i>pop</i>	-			
Registration; (You must include a r	nap showing the pol	rtion of th	ie .	
application/permit/transfer/license	GR Certificate of R	Registratio	on to be ass	igned.)
have attached proof of ownership that may				
of a land sales contract, a court order or dec Department cannot accept a copy of a tax st		of survivo	orship of pro	operty held jointly. The
		. 7	Sugar South	
Application #; Permit License # GR Statement #_6	-OR-			
icense #GR Statement #_6	82 ; GR	Certifica	te of Regis	tration #_680
State of Oregon, Oregon State Hospital				
(Name of Holder of Record)				
Station A	Salem	OR		
(Mailing Address)	(City)	(State)	(Zip)	(Phone #)
 Note: You are required to furnish proof ac given or attempted for each identifi <i>Failure to submit this proof will resulimited to: a copy of returned certif</i> 1) I certify that I am the current owner license or GR Certificate of Registr 2) I have the legal right to request assis 3) I have not been able to contact the right. 4) I further certify that the information Witness my hand this Party Requesting Assign Party Requesting Assign 	ed property owner r sult in the return of y ied mailing, copy of r of the property des ation. gnment under OAR owner(s) of record f n provided herein is day of <u>Jeen</u>	true and of	v to the assi est. (Proof Certificate, this applica -0280 and 6 ove reference correct to the	gnment. ORS 537.220(2) may include but not be or a court order.) ation, Permit, transfer, 690-320-0060. ced application or water ne best of my knowledge.
	· · · · · · · ·			
This certifies assignment and record change a	t The com	oleted "Re	equest for A	ssignment" n n n
Oregon Water Resources Departmenneffectiv	e form mus	t be subm	itted to the	Department
8:00 a.m. on date of receipt at Salem. Oregon Fee receipt # <u>226co</u>	Ŭ	n me reco	ording fee o	JUN 1
For Director by Jerry Saute Program Analys Water Rights Division	t in			
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Last updated: July 19, 2013 Request for Assignment if Permit Holder not available