



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.

I, Cline Butte Utility Company  
*(Name of Applicant / Permit / Transfer Holder / License Holder/GR Certificate of Registration)*  
1230 Golden Pheasant                      Redmond   OR   97756                      541-504-2305  
*(Mailing Address)*                                      *(City)*    *(State)*    *(Zip)*                                      *(Phone #)*

- hereby assign all my interest in and to application/permit/transfer/license/GR Certificate of Registration;
- hereby assign all my interest in and to a portion of application/permit/transfer/license/GR Certificate of Registration; *(You must include a map showing the portion of the application/permit/transfer/license/GR Certificate of Registration to be assigned.)*
- hereby assign a portion of my interest in and to the entire application/permit/transfer/license/GR Certificate of Registration:

Application # G-12905 ; Permit # G-11762 ; Transfer # T-10929  
 -OR-  
 License # \_\_\_\_\_ ; GR Statement # \_\_\_\_\_ ; GR Certificate of Registration # \_\_\_\_\_

As filed in the office of the Water Resources Director, to:  
Oregon Water Utilities - Cline Butte, Inc.  
*(Name of New Owner)*

1230 Golden Pheasant                      Redmond   OR   97756                      541-504-2305  
*(Mailing Address)*                                      *(City)*    *(State)*    *(Zip)*                                      *(Phone #)*

**Note:** If there are other owners of the property described in the Application, Permit, Transfer, License, or GR Certificate of Registration, you must provide a list of all other owners' names and mailing addresses and attach it to this form.

I hereby certify that I have notified all other owners of the property described in this Application, Permit, Transfer, License, or GR Certificate of Registration of this Request for Assignment

Witness my hand this 30<sup>th</sup> day of June, 20 14.

Applicant/Permit Holder \_\_\_\_\_  
 Applicant/Permit Holder Simon Hallgarten  
**Authorized Signatory**

REC'D 7/2/17

**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 # 123914 For Director by Jerry Sauer, Program Analyst in Water Rights Division. *[Signature]*

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

**RECEIVED**  
 JUL 10 2017  
**OWRD**