

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 the Department determines that the application is incomplete, fees have not been paid, or the required documents are not acceptable, the application and all fees submitted will be returned to the applicant.

	If for multiple rights, a separate form a	nd fee for each right v	vill be required.				
71	1, Gregor Dre	~ Hents	o o o o	- Sent LI	ur		_
	(Name of Current Holder of Record)		•-			1	6~·~
	P.D. Box 210				97633	(541)	_8919
	(Mailing Address)		(City) (State	e) (Zip)	(Phone #)		
	hereby assign all my interest in (example, sold all the			sfer/limited	license/groundwate	r statement;	
	hereby assign all my interest in statement; (You must include a license/groundwater statement	map showing the por	tion of the applicat	tion/permit/t	ransfer order/limite	d	
	hereby assign a portion of my i statement; (example, adding an		ntire application/pe	ermit/transfe	er/limited license/gro	oundwater	
	Application # 6-16	400 ; Permit#	6-16156	; Transfer #	;		
\	Limited License #	;	Groundwater State	ment #	;		
	as filed in the office of the Water Reso	urces Director, to:					
/	_	II.					
	(Mana of Naw Owner)						
	(Mailing Address)	e Rd 1	Slamath F	alls,	OR 976	03	
	(Mailing Address)		(City) (Stat	e) (Zip)	(Phone #)		_
ノ	Note: If there are other owners of the groundwater statement, you ne this form. Write the initials (f	ust provide a list of a	ll other owners' na	mes and ma	iling addresses and	attach it to	84
	I hereby certify that I have n order, limited license, or groundwat				this application, per	mit, transfer	sunal
	Witness my hand this (Day)	day of	bruary,	20 <u>/</u> 8.			
	(Day)		(Month)	(Year)			7
	Signature of Current Holder of Reco	rd	/k			<u>_</u>	बहुताहरू इंक
	Failure to provide any of the required information will result in the return of your application.						
	DO NOT WRITE IN THIS	BOX	_	,	-		
	This certifies assignment and recorded oregon Water Resources Departs 8:00 a.m. on date of receipt at See receipt # 125845 For Director by Jerry Sauty.	ment effective llem Gregon.	The completed form <i>must</i> be sulalong with the re	bmitted to th	ne Department		
	Water Rights Division	Servio Request for	Assignment	ı	RECEIVED	WR	

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