

REQUEST FOR ASSIGNMENT

I, Sid Fisher
(Name of Applicant / Permit Holder)

31595 sandlake Rd cloverdale OR 97112 503-965-6393
(mailing address) (City) (State) (Zip) (Phone #)

CHECK ONE

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

Application # S-72364, Permit # 53237;
-OR-

GR Statement # _____, GR Certificate of Registration # _____

as filed in the office of the Water Resources Director, to:

DONALD W. GIDDINGS
(Name of New Owner)

P.O. Box 999 PACIFIC CITY OR OR. 97135 503-965-7420
(mailing address) (City) (State) (Zip) (Phone #)

NOTE: If there are other owners of the property described in this Application, Permit or Certificate of Ground Water 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 or Certificate of Registration of this request for assignment.

Witness my hand this 23 day of August, 2002.

Applicant/Permit holder Sid Fisher

Applicant/Permit holder _____

DO NOT WRITE IN THIS BOX

- This certifies assignment and record change at Oregon Water Resources Department effective 8:00a.m. on date of receipt at Salem, Oregon.
- Fee receipt # 55046
- For Director by Jerry Sauter, Program Analyst in Water Rights Division Jerry Sauter

The completed "Request for Assignment" form *must be* submitted to the Department along with the appropriate recording fees:

- •\$25 for the first page, and
- •\$5 for **each additional page.**
[as required by ORS 536.050(1)(d)]

WATER RESOURCES DEPARTMENT
158 12TH STREET NE
SALEM, OREGON 97301-4172

ok ASSIGN
8/26/02
J.S.