

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

(If Water Right Holder is Not Available)

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 and fee for each right will be required.

| I, margaret Hoffman and Steven Hoffman | ٨ |
|---|---------------|
| (Name of Party Requesting Assignment) 20197 5 Butto Rd Beaverpet OR 97004 503 (Mailing Address) (City) (State) (Zip) (Phone #) 3 5 | |
| hereby request assignment of an entire application/permit/transfer/limited license/groundwater statement; hereby request assignment of a portion of application/permit/transfer/limited license/groundwater statement; (You must include a map showing the portion of the application/permit/ transfer/limited license/groundwater statement to be assigned.) Application # 5-72361: Permit # 53427; Transfer #; | <i>'</i> 8 |
| Limited License # ; Groundwater Statement # ; Robert J Hoffman (dictable) (Name of Current Holder of Record) 20197 5 Buth Rd Blank of Phone #) (Mailing Address) (City) (State) (Zip) (Phone #) | |
| Note: Write the initials (first letters) of your first and last names at the spots indicated below 1) I certify that I am the current owner of the property described in this application, permit, transfer order, limited license, or groundwater statement. I have attached proof of ownership that may include but not be limited to: a copy of the deed to the land, a copy of a land sales contract, a court order or decree, documentation of survivorship of property held jointly. The Department cannot accept a copy of a tax statement. | LO L |
| proof acceptable to the Dengating of that notice of the assignment has been given or attempted for each identified | PARTIAL PROCE |
| Witness my hand this 9 h day of 0 ll , 20 18. (Day) (Month) (Year) Signature of Party Requesting Assignment Marguet Hospinary | MSS (64 PM |
| Failure to provide any of the required information will result in the return of your application. | |

This certifies assignment and record change at Oregon Water Resources Department effective 8:00 a.m. on date of receipt at Salein, Oregon.

Fee receipt # 127297

For Director by Jerry Saute

The completed "Request for Assignment" form must be submitted to the Department along with the recording fee of \$100.

Request for Assignment if Permit Holder not available

RECEIVED

JUL 1 2 2018