

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, Russell Young			
(Name of Party Requesting Assignment)			
P.O. Box 171	Canyon City, OR		<i>541-575-1318</i>
(Mailing Address)	(City) (State	e) (Zip)	(Phone #)
hereby request assignment of an entire appli			
assignment of a <u>portion</u> of application/perm			
showing the portion of the application/permit/ transfer/limited license/groundwater statement to be assigned.)			
Application #	; Permit # <u>Vol. 59, Pg. 116</u>	; Transfer # _	<i>T-</i> 9551;
Limited License #	; Groundwater State	ment #	;
Lazy H Land and Cattle Company			
(Name of Current Holder of Record)			
Unknown			
(Mailing Address)	(City) (Stat	e) (Zip)	(Phone #)
Note: Write the initials (first letters) of your fi	rst and last names at the spots	indicated be	elow
1) Certify that I am the current owner license, or groundwater statement. I have of the deed to the land, a copy of a land so property held jointly. The Department care	r of the property described in attached proof of ownership the ales contract, a court order or or	this applicati hat may inclu decree, docur	on, permit, transfer order, limited ude but not be limited to: a copy
2) I have the legal right to request ass	ignment under OAR 690-310-	-0280 and 69	0-320-0060.
Thave not been able to contact the proof acceptable to the Department that n property owner not a party to the assignm of your request. (Proof may include but recrificate, or a court order.)	otice of the assignment has be ent. ORS 537.220(2) Failure	en given or a to submit th	attempted for each identified is proof will result in the return
4) I further certify that the information	n provided herein is true and	correct to the	e best of my knowledge.
Witness my hand this (Day)	of OCT (Month)	20 <u>18</u> (Year)	
Signature of Party Requesting Assignment Failure to provide any of the required information will result in the return of your-application.			
Failure to provide any of the req	uired information will result	t in the retu	rn of your application.
			

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.

For Director by Jerry Sauter, Frogram Agalyst in

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

nequest for Assignment if Permit Holder not available

RECEIVED

OCT 192018

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