

Water Rights Division. Hauf

Last updated: September 18, 2017 Request for Assignment

## 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 and fee for each right will be required.

| Charles Bloodsworth  Iame of Current Holder of Record)   | <del></del>  |                                       |                          |  |                |
|--|--|---------------------------------------|--------------------------|--|----------------|
| 81166 N Ott Road   | Hermiston,   | OR 9                                  | 7838                     | (541) 571-5015                             |                |
| ailing Address)  | (City)   | (State)                               | (Zip)                    | (Phone #)                                  |                |
| hereby assign <u>all my interest</u> in and to the statement; (example, sold all the land a  |  |                                       | er/limited l             | icense/groundwa                            | ter            |
| hereby assign <u>all my interest</u> in and to <u>a</u> statement; (You must include a map show license/groundwater statement to be assigned.)   | wing the portion of the a  | pplication                            | /permit/tr               | ansfer order/limit                         | ed             |
| hereby assign a portion of my interest in statement; (example, adding an addition  |  | ntion/perm                            | it/transfer              | /limited license/g                         | roundwater     |
| Application # <u>G-14597</u>   | ; Permit # <u>G-13559</u>  | ; Tra                                 | ansfer#                  |  | ·              |
| Limited License #  | ; Groundwater  | Statemen                              | t#                       | ;  |                |
| filed in the office of the Water Resources Directly ewel Farm LLC  | ector, to:   |                                       |                          | . •  |                |
| ame of New Owner)  | **************************************   |                                       |                          |  |                |
| 302 W Coats Road   | Prosser  | WA                                    | 99350                    | (505) 78                                   | <u>86-9850</u> |
| ailing Address)  | (City)   | (State)                               | (Zip)                    | (Phone #)                                  |                |
| Note: If there are other owners of the property groundwater statement, you must provi this form. Write the initials (first letters)  I hereby certify that I have notified all order, limited license, or groundwater statement. | de a list of all other owne ) of your first and last na other owners of the prop | rs' names<br>mes at the<br>erty descr | and mailir<br>spot indic | ng addresses and a<br>cated below <u>C</u> | uttach it to   |
| Witness my hand this day (Day)   | of December (Month)  | ,20                                   | <b>8</b><br>Year)        | <i>-</i> √                                 |                |
| Signature of Current Holder of Record  | ranco a, B   | wood                                  | watt                     | TAD  |                |
| Failure to provide any of the requ   | uired information will I   | result in t                           | he return                | of your applicat                           | ion.           |
| This certifies assignment and record change a Oregon Water Resources Department effectiv 8:00 a.m. on date of receipt at Salem, Oregon Fee receipt # 128745  | The complete form must   | be submi                              | ted to the               | Assignment" Department §\$100.             |                |

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