## **REQUEST FOR ASSIGNMENT**

MYRON KU				•
(Name of Party Requesting As	<i>Ι ΕΝ</i>			
		OR	97301	503-585-8337
<u>6500 STATE</u> (Mailing address)	(City)	(State)	(Zip)	503-585-833; (Phone #)
CHECK ONE				
🗆hereby request assig	gnment in and to applica	ation/permit/transf	er;	
🗆hereby request assig	gnment in and to a <i>port</i>	ion of application/	/permit/transfer;	
(You must include a	map showing the portio	n of the applicatio	n/permit/transfer	to be assigned.)
property held jointly;	of of ownership that may and sales contract, a co de <b>\$5 for <u>each</u> additior</b>	urt order or decre		
Application # 150 3	3, Permit #	13949	, Transfer # _	
GR Statement #	-( . GR Cert	<i>OR-</i> ificate of Registr	ation #	
1 AWREAUS St	RARBARIA SI	KI.I IV AN		
LAWRENCE &	ler of Record)		<u> </u>	
		OR		
(Mailing address)	(City)	(State)	(Zip)	(Phone #)
or Certificat	other owners of the prop e of Ground Water Reg <b>mes and mailing addr</b>	istration, <b>you mus</b>	st provide a list	
I hereby certify that I have Permit or Certificate of Re	e notified all other owne egistration of this reques	rs of the property st for assignment.	described in this	Application,
I hereby certify that I have Permit or Certificate of Re Witness my <sub> </sub> hand this	e notified all other owne egistration of this reques <u>4444</u> day of <u>A444</u>	rs of the property st for assignment.	described in this	Application,
I hereby certify that I have Permit or Certificate of Re Witness my <sub> </sub> hand this Party Requesting / Party Requesting /	e notified all other owne egistration of this reques <u>4</u> day of <u>A4</u> <u>4</u> Assignment <u>Mype</u>	rs of the property st for assignment.	described in this	Application, RECEIVED