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Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301 (503) 986-0900 www.wrd.state.or.us

## **Request for Assignment**

138 10-2-

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,	orthwest Farm Credit S						
	of Current Holder of Record) Box 2515	Spokane (City)	WA	99220	866.55	52.9172	
	g Address)	(City)	(State)	(Zip) (	Phone #)	ĩ	
X	hereby assign <u>all my interest</u> in and to <u>the example</u> , sold all the land authori		nit/transfer	limited licens	se/groundwate	r statement;	
	hereby assign <u>all my interest</u> in and to <u>a po</u> statement; ( <u>You must include a map</u> showin license/groundwater statement to be assign	g the portion of the a	pplication/	/permit/transf	er order/limite	d	
	hereby assign a portion of my interest in and to the entire application/permit/transfer/limited license/groundwater statement; (example, adding an additional person) $S - 54534$						
	Application # <u>S - 87308</u> ; Permit # <u>S 87308</u> ; Transfer #;						
	Limited License #	; Groundwate	er Statemen	ıt #			
⊾ (Name &	in the office of the Water Resources Direct loy d. <u>Haines</u> of New Owner) 51 Woster Street Direct Read ag Address) Old address	Lute 222	hland (State)	<u>OR 9-</u> (Zip)	1 <b>520 54 </b> (Phone #)	-535-1000	
Note: If there are other owners of the property described in the application, permit, transfer order, limited license, or groundwater statement, you must provide a list of all other owners' names and mailing addresses and attach it to this form. Write the initials (first letters) of your first and last names at the spot indicated below thereby certify that I have notified all other owners of the property described in this application, permit, transfer order, limited license, or groundwater statement of this Request of Assignment.							
Wit	ness my hand this (Day) day of	Septemb (Month)	<b>er</b> , 20_				
Sign	nature of Current Holder of Record	22 Leish	a Hode	gson, Fir	nancial S	pecialist	
Failure to provide any of the required information will result in the return of your application.							
	This certifies assignment and record change at Dregon Water Resources Department effective 3:00 a.m. on date of receipt at Salem, Oregon. Fee receipt # For Director by Mary F. Bjork. Program Analyst in Water Rights Division. ルー、ろて、〜	form mus	t be submi	quest for Ass tted to the De ding fee of <b>\$1</b>	partment		
				RECE	IVED		
	Last updated: September 18, 2017 R	equest for Assignment		SEP 2	5 2019	WR	
				• OW	RD		