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Oregon Water Resources Department 725 Summer Street NE, Suite A Salem Oregon 97301-1266 (503) 986-0900 www.wrd.state.or.us

Request for Assignment

If for multiple rights, a separate form and fee for each right will be required.

I, MARILYN ZERBA and	CECIL ZERBA			
(Name of Applicant	/ Permit / Transfer Holder)			
P.O. BOX 682	MILTON-FREEWA	OR97962	541-9389463	
(Mailing address)	(City) (Stat	e) (Zip)	(Phone #)	
hereby assign <u>all my</u>	<u>einterest</u> in and to application	n/permit/transfer	 1	
	<u>r interest</u> in and to a <u>portion</u> a map showing the portion of			
□hereby assign <u>a port</u>	ion of my interest in and to the	he <u>entire</u> applicat	ion/permit/transfer;	
Application # G-15554	, Permit # <u>G-15193</u> - <i>OR</i> -	<u>3;</u> Tra	nsfer #	RECEIVED
	, GR Certificate of			
as filed in the office of the	Water Resources Director, to	o:		WATER RESOURCES DEPT
BANK OF WHITMAN	(ASSIG	INMENT FOR SE	CURITY PURPOSES C	
(Name of New Owner)				
P.O. Box 270	Colfax,	WA 991	11 509-397-462	9
(Mailing address)	(City)	(State) (Zip)		
NOTE: If there are other owners of the property described in this Application, Permit, Transfer or Certificate of Ground Water Registration, you must provide a list of all other owners' names and mailing addresses and attach it to this form. I hereby certify that I have notified all other owners of the property described in this Application, Permit or Certificate of Registration of this request for assignment.				
Ap	7 day of <u>June</u> olicant/Permit holder <u></u> olicant/Permit holder	arth	Zla	ð.
DO NOT WRITE IN 1 This certifies assignment and re Oregon Water Resources Depar 8:00 a.m. on date of receipt at S Fee receipt # 88/23 For Director by Jerry Sauter 1 Water Rights Division	submitt record change at truent effective alem, Oregon. sogram Anotyst in	• •	nal page.	

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