## RECEIVED

JUN 19 2007

## RECEIVED

JUN 19 2007



Salem, Oregon 97301-1266 (503) 986-0900 www.wrd.state.or.us

Request for Assignment

WATER HESOURCES DEPT SALEM, OREGON

By Proof of Ownership (If Permit/Transfer Holder is Not Available)

f for multiple rights, a separate form and fee for early . JAMES A. COULTER AND		•	COULTER
(Name of Party Requesting Assignment)			
11631 MARION Rd. S.E. (Mailing Address)	TURVER	R 97392	503 743-221
(Mailing Address)	(City)	(State) (Zip)	(Phone #)
hereby request assignment of application	on/permit/trans	fer;	
hereby request assignment of a <u>portion</u> (You must include a map showing the partial)		-	(transfer to be assigned.)
have attached proof of ownership that may includ f a land sales contract, a court order or decree, doo department cannot accept a copy of a tax statemen	cumentation of	survivorship of pr	operty held jointly. The
application #; Permit #		; Transfer#	
pplication #; Permit #; R Statement #; GR Certificate of	OR- of Registration	<sub>#</sub> 4152	•
EDWIN AND VIRGINIA			
(Name of Permit/Transfer Holder of Record)		-	
(Mailing Address)	City	(State) (Zip)	(Phone #)
(Mailing Address)	(City)	(State) (Zip)	(Phone #)
<ol> <li>Note: You are required to furnish proof acceptable given or attempted for each identified propagation of the submit this proof will result in the limited to: a copy of returned certified man.</li> <li>I certify that I am the current owner of the of Registration.</li> <li>I have the legal right to request assignment as I have not been able to contact the owner(stright.</li> <li>I further certify that the information provided witness my hand this</li></ol>	perty owner not the return of you illing, copy of a property descrit under OAR 69 of record for ded herein is true	a party to the assiur request. (Proof Death Certificate, ibed in this applicate) and 60-310-0280 and 60 the above references	gnment. ORS 537.220(2) may include but not be or a court order.) ation, Permit or Certificate 590-320-0060. sed application or water
Witness my hand this day of _ Party Requesting Assignment	lam	, 20 <u>0,</u> می A. Co	ulter
Party Requesting Assignment		w H. Co	ulle
DO NOT WRITE IN THIS BOX  is certifies assignment and record change at egon Water Resources Department effective	submitted to recording fe	the Department a es:	assignment form <i>must</i> be long with the appropriate
00 a.m. on date of receipt at Salem, Oregon. the receipt # <b>38200</b> or Director by Jerry Saure Program Avallyst in Vater Rights Division	• \$5	5 for the first pag for each addition required by ORS	al page