Fee receipt # 132991

For Director by Mary F. Bjork. Program Analysit in Water Rights Division.

Last updated: September 18, 2017



## 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.

600	of Current Holder of Atlantic Avenue	oj Recoraj		Boston	MA	02210	
Maili	ng Address)			(City)	(State)	(Zip)	(Phone #)
X			and to the entire a and authorized un		nit/transfe	er/limited l	icense/groundwater statement;
	statement; (You mi	portion of the a	pplication	n/permit/tr	ed license/groundwater ansfer order/limited athorized under the right)		
	hereby assign a por statement; (example				ation/pern	mit/transfer	/limited license/groundwater
	Application	on #	; Permit	#_S-55021	; T	ransfer #_	;
	Limit	ed License #		_; Groundwate	er Stateme	ent #	;
as file	d in the office of the	Water Resou	rces Director, to:				
K	YLIX VINEYAF	RDS OREC	ON LLC				
(Name	of New Owner)						
12	50 Rene-Levesqu	ie Blvd. W	est, Suite 1400	, Montreal,			B 5E9, 1-514-218-3657
	50 Rene-Levesqu ng Address)	ie Blvd. W	est, Suite 1400	), Montreal, (City)			B 5E9, 1-514-218-3657 (Phone #)
Maili	ng Address) e: If there are other	owners of the	property describ	(City)	(State)	(Zip)	(Phone #) For order, limited license, or
(Maili	ng Address) e: If there are other of groundwater state	owners of the	property describ	(City) ed in the applic	(State)	(Zip) rmit, transfes and mail	(Phone #)
Not	e: If there are other of groundwater state this form. Write t	owners of the ment, you m he initials (fin	property describust provide a list of your tified all other ow	(City)  ed in the applic of all other own r first and last r	cation, per errs' name names at to	(Zip)  rmit, transfes and mail the spot incorribed in t	(Phone #)  For order, limited license, or ling addresses and attach it to liceted below
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Request for Assignment

RECEIVED

form must be submitted to the Department

along with the recording fee of \$100.

WR

JUL 0 8 2020