

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

Request for Assignment RECEIVED AUG 27 2020

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					OVAL	
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	for multiple rights, a separate form and fee for each right will be required.					
	<u>tt H. McKenzie</u> e of Current Holder of Record)					
POR	ox 281 S	ixes OR 97470	5	(541) 332-3381		
	ing Address) (Ciu			(Phone #)		
	hereby assign <u>all my interest</u> in and to <u>the entire</u> application/permit/transfer/limited license/groundwater statement; (example, sold all the land authorized under the right)					
	hereby assign <u>all my interest</u> in and to <u>a portion</u> of application/permit/transfer/limited license/groundwater statement; ( <u>You must include a map</u> showing the portion of the application/permit/transfer/limited license/groundwater statement to be assigned. Example, sold a portion of the land authorized under the right)					
hereby assign <u>a portion of my interest</u> in and to <u>the entire</u> application/permit/transfer/limited license/groundwater statement; (example, adding an additional person)						
	Application #G-13664 ; Permit # 9	<u>J-13029</u>	; Transfer #;			
	Limited License #	; Groundwater	Statement #			
as file	d in the office of the Water Resources Director, to:					
(Nam	e of New Owner) (Mailing	Address)	eburg, OR 97471-1739 (City) (State)	(Zip)		
	nzie Family Properties, LLC, a Limited Liability Co Name of New Owner)	mpany				
PO	Box 281	Sixes, OR 974	76	(541) 332-3381		
		ty) (State)	(Zip)	(Phone #)		
order	If there are other owners of the property described is groundwater statement, you must provide a list of al this form. Write the initials (first letters) of your fir I hereby certify that I have notified all other owne limited license, or groundwater statement of this Res	Il other owners st and last name rs of the proper quest for Assign	names and mailing add es at the spot indicated b ty described in this appl mment	resses and attach it to elow	Approve 0-20-2020	
	ess my hand this(Day)	_ day of	August (Month	), 20 <u>20</u>	(ear)	
Signa	ture of Current Holder of Record	-Mida	mjil		LT Days	
	Failure to provide any of the require	d information	will result in the retur	n of your application.	63	
DC O 8: Fe Fe	is certifies assignment and record change at regon Water Resources Department effective 00 a.m. on date of receipt at Salem, Oregon. ee receipt #33342 or Director by Mary F. Bjork. Program Analyst in later Rights Division.	The completed form must be	d "Request for Assignme submitted to the Depart recording fee of \$100.	ent"		