



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

Request for Assignment By Proof of Ownership

OWRD

(If Water Right Holder is Not Available)

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 sepa	arate form and fee for each rig	tht will be require	ed.			
Kuan Suo	ity / Kandal	Sualy				
Name of Party Requesting	Assignment)	3				
790 Kailroad	Ave	Ontario	OR	97914	(208)	989-3441
(Mailing Address)		(City)	(State)	(Zip)	(Phone #)	
hereby request assign	ment of an entire application/j	permit/transfer/li	mited lic	ense/groundw	ater statement;	hereby request
assignment of a portion	on of application/permit/trans	fer/limited licens	e/ground	lwater stateme	nt; (You must in	iclude a map
showing the portion of to be assigned.)	of the application/permit/ trans	sfer/limited licen	se/groun	dwater statem	ent	
	n # <u>G-13506</u> ; Permi	1# G-1192	16_; T	ransfer #	;	
Limite		_; Groundwater	Stateme	nt #		
Lee and 1	eo Monce					
Name of Cyrrent Holder of		01			Con	
	Ave	Untorio	OR	97914		889-5764
Mailing Address)		(City)	(State)	(Zip)	(Phone #)	
Note: Write the initials (first letters) of your first and	last names at the	spots in	dicated below		
0	I am the current owner of the		_			order, limited
license, or groundw	ater statement. I have attached	proof of owners	ship that	may include b	ut not be limited	d to: a copy
	nd, a copy of a land sales con				ation of survivo	rship of
0-	y. The Department cannot acc					
2) Ko I have the leg	gal right to request assignment	under OAR 690	0-310-02	80 and 690-32	0-0060.	9
proof acceptable to	en able to contact the owner(sthe Department that notice of	the assignment h	as been	given or attem	pted for each id	
	a party to the assignment. OR oof may include but not be limeter and as					
0 -						0
4) <u>RS</u> I further cert	ify that the information provide	led herein is true			of my knowled	ge.
Witness my hand this	day of 1	Harch	, 20	The state of the s		
	(Day)	(Month))	(Year)		4
Signat	ure of Party Requesting Assig	nment \mathcal{K}_{q}	en .	Durty		
	ovide any of the required in		esult in	the return of	your applicati	

This certifies assignment and record change at Oregon Water Resources Department effective 8:00 a.m. on date of receipt at Salem, Oregon.

Fee receipt #__/34_7/5___

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

The completed "Request for Assignment" form *must* be submitted to the Department along with the recording fee of \$100.