

Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301 (503) 986-0900

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.

www.wrd.state.or.us

	spies Real Estate 6	roun LLC				
Name	of Current Holder of Record) Box 548 and Address)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·			
Po	Box 548	Comallis	OR	97339	1 591	23/2870
Mailir	ng Address)	(City)	(State)	(Zip)	(Phone #)	
A	hereby assign all my interest in and (example, sold all the land	to the entire application/perd authorized under the right)		r/limited lice	ense/groundv	water statement;
3	hereby assign <u>all my interest</u> in and statement; (You must include a map license/groundwater statement to be	p showing the portion of the	application	/permit/tran	sfer order/li	mited
]	hereby assign a portion of my interestatement; (example, adding an add		cation/pern	nit/transfer/li	mited licens	e/groundwater
	Application # R-8888	38 ; Permit #	; T	ransfer #	858 8	L ;
	Limited License #; Groundwater Statement #;					
s filed Jos Name	I in the office of the Water Resource pph Clinton and Esti Si of New Owner) 4704 Alpine Rd. ng Address)	es Director, to: labbert Monfalco	ne -2	A7115	· Ceu	1) 9711 5529
Maili	ng Address)	(City)	(State)	(Zip)	(Phone #)	1) 174-3320
Note P _K	e: If there are other owners of the progroundwater statement, you must this form. Write the initials (first I I hereby certify that I have notified the initial of the programment	provide a list of all other ow letters) of your first and last ed all other owners of the pr	lication, per vners' name t names at t roperty des	s and mailin he spot indic cribed in this	g addresses a ated below_	ed license, or and attach it to
Ps orde	groundwater statement, you must this form. Write the initials (first last last last last last last last la	provide a list of all other ow letters) of your first and last ed all other owners of the pratement of this Request of A	lication, per vners' name t names at t roperty des Assignment	s and mailin he spot indic cribed in this	g addresses a ated below_	and attach it to PS.

Request for Assignment

8:00 a.m. on date of receipt at Salem, Oregon. Fee receipt # 134744 For Director by Mary 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.

RECEIVED

MAR 1 2 2021

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