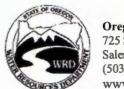


OWRD





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

By Proof of Ownership (If Water Right Holder is Not Available)

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.

| 31978 N. LAKE CREE | Assignment) K DRIVE | TANGENT | , OR 97389 | (541) 967-5925 X 2 |
|---|--|---|---|--|
| Mailing Address) | | (City) | (State) (Zip) | (Phone #) |
| | n of application/permi | t/transfer/limited licen | se/groundwater stat | ndwater statement; hereby requestement; (You must include a map tement |
| Application | # <u>G13530</u> | Permit # G12920 | ; Transfer #_ | ; |
| Limite | d License # | ; Groundwater | Statement # | |
| RANDALL P MANIC | KE | | | |
| Name of Current Holder of 87347 HOFFER LAN | | BAND | ON, OR 97411 | |
| Mailing Address) | | (City) | (State) (Zip) | (Phone #) |
| of the deed to the lar property held jointly 2) DS I have the legal 3) I have not been property owner not a | ter statement. I have a and, a copy of a land sa a . The Department car right to request assignment able to contact the che Department that not party to the assignment and include but not be | ttached proof of owner les contract, a court or anot accept a copy of a ment under OAR 690-3 owner(s) of record for otice of the assignment ent. ORS 537.220(2) Factorial results for the second for the second for the assignment of the trace of | ship that may includer or decree, docutax statement. 310-0280 and 690-3, the above reference has been given or allure to submit this | n, permit, transfer order, limited de but not be limited to: a copy mentation of survivorship of 20-0060. ed transaction. I have attached attempted for each identified a proof will result in the return of mailing, copy of a Death |
| | | rovided herein is true a | nd correct to the be | st of my knowledge. |
| , | | | 20.21 | |
| Witness my hand this | day of (Day) re of Party Requesting | (Month) | , 20 <u>21</u> . (Year) | Thent le |

Oregon Water Resources Department effective 8:00 a.m. on date of receipt at Salem, Oregon. 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.