REQUEST FOR ASSIGNMENT				SEP 1 6 2005
1. ROGER &	VIRGINIA	HAW	rend	WATER RESOURCES DEPT
(Name of Applicant / Pern				SALEM, OREGON
P.O. BOX 481	HINES	OR	97738	589-0230
(mailing address)	(City)	(State)	(Zip)	(Phone #)
CHECK ONE				
□hereby assign <u>all my int</u>	<u>erest</u> in and to a	application/	permit/transfer;	
∴hereby assign all my into (You must include a map assigned.)				
□hereby assign <u>a portion</u> transfer;	of my interest	in and to th	e <u>entire</u> applicatio	n/permit/
Application # 6-14377	, Permit # _ -OF	G-154	3 <u>ス</u> , Transfer #	#
GR Statement #		-	of Registration #	
as filed in the office of the W	ater Resources	Director, to	:	
JOHN & KAR	EN SIN	240Mr		
(Name of New Owner)				
P.O. BOX 3025			97721	541-495-2262
(mailing address)	(City)	(State)	(Zip)	(Phone #)
Permit, Transfe	er or Certificate of all other own	of Ground V	escribed in this Ap Vater Registration, s and mailing add	you must 🔏 🔊
I hereby certify that I have no Application, Permit or Certific				ed in this
Witness my hand this	day of _ S	EPT	, 20_05	10
Applicar	t/Permit holder	16 m 20	avette	
Applicar	t/Permit holder	Manue	a Haupth	

DO NOT WRITE IN THIS BOX

This certifies assignment and record change at Oregon Water Resources Department effective 8:00a.m. on date of receipt at Salem, Oregon.
- Fee receipt # 77374

- For Director by Jerry Saute

Water Rights Division

The completed "Request for Assignment" form must be submitted to the Department along with the appropriate recording fees:

- ♦ \$25 for the first page, and
- \$5 for each additional page. [as required by ORS 536.050(1)(d)]

WATER RESOURCES DEPARTMENT 725 SUMMER STREET NE, SUITE A SALEM, OREGON 97301-1271