Split A Permit and Request for Issuance of Replacement Permits

Affidavit of Non-Conveyance and Reading of Permit _____

Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.oregon.gov/OWRD

State of Oregon)
)ss
County of _____)

I/We, _____, mailing address (city, state, zip) _____

phone number: _____ e-mail :_____

Being firstly sworn depose and say:

1. Permit _____, has not been conveyed or withheld and remains appurtenant to my/our lan
2. I/We attest that I/we have read Permit _____.

Affiant Signature	Printed Name	Date
Affiant Signature	Printed Name	Date

Subscribed and Sworn to before me this _____ day of_____, 20_____.

_____
Notary Public for Oregon

My commission expires _____