

**STATE OF OREGON  
DEPARTMENT OF STATE LANDS  
REMOVAL/FILL PERMIT TRANSFER**

Permit Number: \_\_\_\_\_

**Permit Holder:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

I hereby transfer all responsibility for the above referenced permit to the transferee listed below.

\_\_\_\_\_  
Signature Date

STATE OF \_\_\_\_\_  
County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ (officer or agent of corporation), the \_\_\_\_\_ (title) of \_\_\_\_\_ (corporation), on behalf of the corporation.

\_\_\_\_\_  
Signature  
My Commissions Expires: \_\_\_\_\_

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**Transferee:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

On behalf of \_\_\_\_\_ (name of company if applicable), I have reviewed the permit conditions, application and other attachments and agree to be bound by all the terms, conditions, obligations, and liabilities in any way connected with the above referenced permit.

\_\_\_\_\_  
Signature Date

STATE OF \_\_\_\_\_  
County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ (officer or agent of corporation), the \_\_\_\_\_ (title) of \_\_\_\_\_ (corporation), on behalf of the corporation.

\_\_\_\_\_  
Signature  
My Commissions Expires: \_\_\_\_\_

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The State of Oregon, acting by and through the Department of State Lands in the above-mentioned permit, acknowledges this transfer.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

DEPARTMENT OF STATE LANDS  
By: \_\_\_\_\_  
Region Manager