Ownership Transfer Notification

NOTICE: In order to document monthly water usage on Woahink Lake as mandated by the Water Resources Department of the State of Oregon, Dunes City requires that all persons selling or transferring ownership of property, which utilizes a permit to use Dunes City's water right, shall complete this update form. Dunes City water use permits stay with the property and are non-transferable.

Please type or print legibly when filling in the following information

PROPERTY DESCRIPTION
Address: ______________________________________________________________________
Map / Tax Lot Number: ___________________________________________________________

PROPERTY BUYER INFORMATION
Buyer's Name: ___________________________________________________________________
First                                                                                Last
Mailing Address: _________________________________________________________________
City                                                  State                                                  Zip
Telephone:  ______________________________________________________________________
Home                                                               Cell                                                               Work

PROPERTY SELLER INFORMATION
Seller's Name: ___________________________________________________________________
First                                                                                Last
Mailing Address: _________________________________________________________________
City                                                  State                                                  Zip
Telephone:  ______________________________________________________________________
Home                                                               Cell                                                               Work

REAL ESTATE AGENT INFORMATION
Agent's Name: ___________________________________________________________________
First                                                                                Last
Mailing Address: _________________________________________________________________
City                                                  State                                                  Zip
Telephone:  ______________________________________________________________________
Work                                                Cell                                                Fax