

SKAGIT SEPTIC SYSTEMS
307 E DIVISION STREET #D
MOUNT VERNON WA 98274



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Kathy Hill, Skagit County Auditor
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SERVICE CONTRACT

MAINTENANCE AND MONITORING shall be conducted by an authorized and licensed contractor acceptable to the Skagit County Health Department. The property owner shall be responsible for yearly maintenance expense and lab tests.

TEST RESULTS for TSS, BOD, and FC shall be submitted to the Health Department on forms as designated by the Washington State Department of Health, Environmental Programs, or modified forms at the discretion of the Health Officer.

SERVICE NEEDED due to contamination explained in the Owner's Manual will not be covered by the warranty or service contract. Damage from machinery, vandalism, or animals will also not be covered. Any pumping will be at the owners expense. The need for pumping will be evaluated at maintenance inspections and should be anticipated every three to five years.

UPON TERMINATION of maintenance/service contract, for any reason whatsoever, notice shall be made to the Health Department by maintenance/monitoring entity having been terminated.

AS A CONDITION of this alternative on site sewage treatment system, the following shall be included:

1. Right of entry to the property for purposes of inspection, monitoring, necessary enforcement action, maintenance, operation, and sampling. Upon notification of property owner, this right of entry applies to approval agency and the approved maintenance and service contractor;
2. Requirements that the system owner shall not cause any part of the system to become non functional or ineffective;
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3. The system owners acceptance of the responsibility of obtaining approved maintenance, operation, sampling, and testing services in compliance with these guidelines, for the life of the system;
4. The system owner shall notify prospective purchasers of the requirements and conditions inherent with the perpetual function of the on site sewage treatment system.

Robert A. Worley Print

Robert A. Worley Signature

Property owner
STATE OF WASHINGTON)
COUNTY OF SKAGIT)

I HEREBY CERTIFY that I have satisfactory evidence that Robert Worley (property owner) signed this instrument and acknowledge it to be his free and voluntary act for the uses and purposes mentioned herein.

SUBSCRIBED AND SWORN to before me this 29th day of June 2000.

Notary Public in and for the State of Washington
my commission expires: 1-05-01

Patricia A. Bantz

