

Return Name & Address:



200103010079
Skagit County Auditor

3/1/2001 Page 1 of 1 1:10:30PM

TITLE NOTIFICATION - SPECIAL FLOOD HAZARD AREA

Pursuant to SCC 14.34.110

Grantor/Property Owner: DONALDSON TRUST

Grantee: Skagit County Planning & Permit Center **Legal Description:** Sec 19 Twp 31 Range 4

Property I.D. #: P673-66 - - **Tax Account #:** 3950-003-004-0103

Parcel Address or Location: 15256 WALL STREET MV

Flood Hazard Zone: A0 **Firm Panel #:** 530151 0250 **C** **Base Flood Elevation:** 3 M.S.L. or DEPTH

Notice: This parcel is located in a "Special Flood Hazard Area" as identified on the Flood Insurance Rate Map (FIRM) and as adopted by Skagit County. This parcel is subject to periodic flooding and may also be prone to other hazards caused by flooding. The Flood Disaster Protection Act of 1973 and the National Flood Insurance Reform Act of 1994 mandate the purchase of flood insurance as a condition of Federal or Federally related financial assistance for acquisition and/or construction of buildings in Special Flood Hazard Areas. Skagit County participates in the National Flood Insurance Program (NFIP) thereby making all properties eligible for flood insurance.

All new construction or substantial improvements to structures are subject to Skagit County Building Codes per SCC Title 15 and Skagit County Flood Damage Prevention Ordinance Title 14. Any building determined to be in violation of state or local floodplain management regulations or ordinances cannot be covered by flood insurance nor can an existing policy be renewed where violations occur. The Skagit County Planning and Permit Center maintains information related to state and local regulations, flood protection measures, flood hazard zones and in some cases potential flood depths.

Property Owner's signature Don Magnuson

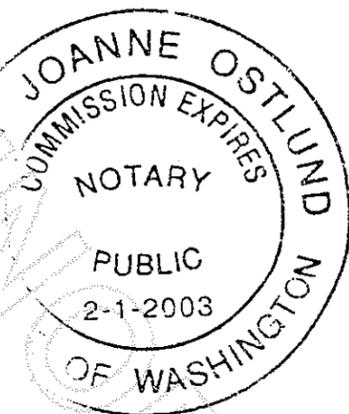
State of Washington, County of Skagit.

On this 1st day of March, year of 2001 before me

MARY JOANNE OSTLUND Notary Public, personally appeared

DON MAGNUSON personally known to me

to be the person whose name is subscribed to this instrument, and acknowledged that he/she executed it.



Witness my hand and official seal:

Notary's Signature Mary Joanne Ostlund Notary Public in and for the State of Washington

residing at Burlington My Commission Expires: 2-1-2003