Return Name & Address:	
6435 ZUMIRUZ DE #4	200707160136 Skagit County Auditor
MALIBOS CA 40065	1 of 211:11AM
TITLE NOTIFIC	CATION
Development Activities On or Adjacent to D	-
per SCC 14.1	6.870
Grantor/Property Owner: YENOKIDA FAMILY TRUST	A Tay #- 000000 0 000 0000
Grantee: Skagit County Planning & Development Service	
Property I.D. #: P47715	Permit Number: BP07-0698
Legal Description: O/S#575 AF#764003 1973 S1/2 SW1/4 OF N	
Parcel Address: 1383 CHUCKANUT RIDGE DRIVE BO	
Notice: "This parcel lies within an area or within 500 feet of an area mineral resource lands of long-term commercial significance) in Skat activities occur or may occur in the area that may not be compatible discomfort to area residents. This may arise from the use of chemical with associated activities, which occasionally generates traffic, dust natural resource management operations as a priority use on design prepared to accept such incompatibilities, inconveniences or discomforwhen performed in compliance with Best Management Practices and application might be made for mining-related activities including extrand recycling of minerals. If you are adjacent to designated Natural designated NRL lands consistent with SCC 14.16.810.	designated as a natural resource land (agricultural, forest or git County. A variety of Natural Resource Land commercial with non-resource uses and may be inconvenient or cause s; or from spraying, pruning, harvesting, or mineral extraction; smoke, noise, and odor. Skagit County has established ated Natural Resource Lands, and area residents should be in from normal, necessary Natural Resource Land operations local, State, and Federal law." In the case of mineral lands, action, washing, crushing, stockpilling, blasting, transporting Resource Lands, you will have setback requirements from
Within:Rural ResourceAgricultureIndustrial Forest	
Adjacent: _Rural ResourceAgricultureIndustrial Forest VENOR IDA FAMILY TRUST GORDON GEORGE Property Owner's Signature, YENDRIDA TIEGState of Washington, County year ofbefore m	Wan Jenn Jan Mikon Miss y of Skalgit. Of thisday of
MICHOU WARS	
YGNOKIDA TIGE to be the person whose name acknowledged that he/she e	personally known to me ne is subscribed to this instrument, and xecuted it.

Notary Public in and for the State

_My Commission Expires:____

Witness my hand and official seal: Notary's Signature_____

of Washington residing at ___

}ss.
WOULDIA HALASEY, SIGNER(S) MICHOU MASS YELLOW!
proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal.
FORMATION
it could prevent fraudulent attachment of this acknowl- DESCRIPTION OF ATTACHED DOCUMENT
DESCRIPTION OF ATTACHED DOCUMENT
Title or type of DOCUMENT
NUMBER OF PAGES
n-12-01
DATE OF DOCUMENT
DATE OF DOCUMENT