

UNOFFICIAL



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Skagit County Auditor

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'Always working for  
a safer and healthier  
Skagit County'

OPERATION-MAINTENANCE & MONITORING REQUIREMENT  
FOR PROPRIETARY ONSITE SEWAGE SYSTEMS

**This form must be recorded before permit approval**  
NOTICE OF ON-SITE SEWAGE SYSTEM MAINTENANCE AGREEMENT REQUIREMENT  
(DESIGN)

GRANTOR: (NAME OF OWNER) Kuhlman, Steve

Kuhlman, Steven

GRANTEE: SKAGIT COUNTY

ADDRESS BRADSHAW RD - MTLEARNER WA

PARCEL # P23131

P23131

LEGAL DESCRIPTION:

Legal Description Abbreviation Definitions

DT 15 DK 1 THAT PORTION OF THE N1/2 SW1/4 DESCRIBED AS FOLLOWS: COMMENCING AT THE SW CORNER OF THE SW1/4 (SW SECTION CORNER) THENCE NORTH 0-22-33 EAST ALONG THE WEST LINE OF SAID SW1/4, 1325.84 FEET TO THE SW CORNER OF SAID N1/2 OF THE SW1/4 AND BEING THE TRUE POINT OF BEGINNING; THENCE SOUTH 89-50-11 EAST ALONG THE SOUTH LINE OF SAID N1/2 OF THE SW1/4, 315 FEET; THENCE NORTH 0-22-33 EAST PARALLEL WITH SAID WEST LINE OF THE SW1/4, 296 FEET; THENCE NORTH 89-50-11 WEST PARALLEL WITH SAID SOUTH LINE OF THE N1/2 OF THE SW1/4, 315 FEET, MORE OR LESS TO THE WEST LINE OF SAID SW1/4 TO A POINT BEARING NORTH 0-22-33 FROM THE TRUE POINT OF BEGINNING; THENCE SOUTH 0-22-33 WEST ALONG SAID WEST LINE, 296 FEET, MORE OR LESS TO THE POINT OF BEGINNING. SURVEY AF#200809200119

THE FOLLOWING INFORMATION HAS BEEN DISCLOSED TO THE HOMEOWNER AS PER SKAGIT COUNTY CODE 12.05.120 AND WASHINGTON ADMINISTRATIVE CODE 246-272A-0015 and 0270:

1. Maintenance & Monitoring Required: The septic system to be installed on this lot will require annual or more frequent as required scheduled maintenance and monitoring.
2. Contract Required: A contract for perpetual maintenance and monitoring must be obtained before the onsite sewage disposal system is put into use.
3. Maintenance Specialist Required: The person performing this service must be certified by the Skagit County Health Department.

I have read and fully understand the conditions contained within this notification.  
For witnessing or attesting a signature: State of Washington, County of Skagit

(Owner signature) [Signature] date 10-19-07

Signed or attested before me on 10/19/07 by (Signature of Notary)

[Signature] date 10/19/07 My appointment expires 08/20/2010

