



11/1/2007 Page

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1 9:38AM



OPERATION-MAINTENANCE & MONITORING REQUIREMENT FOR PROPRIETARY ONSITE SEWAGE SYSTEMS

Always working for a safer and healthur Skaget Loung

This form must be recorded before permit NOTICE OF ONLS

(DESIGN)  ON-SITE SEWAGE SYSTEM MAINTENANCE AGREEMENT REQUIREMENT  (DESIGN)	7 <b>3.750</b> 0
GRANTOR: CNAME OF OUR CALL OF THE CONTROL OF THE CO	7LA Î
GRANTOR: (NAME OF OWNER) Chaffey North LLC ADDRESS KAGIT COUNTY	
PARCEL # P123852 Meadows Lane	
LEGAL DESCRIPTION:	
Bay Meadows, Lot 010, Acres 1:06, AF#200511280180, Being a portion of SW1/4.	
Roine a Durtion of Children	
Delig of person of SW1/4.	
THE FOLLOWING INFORMATION HAS BEEN DISCLOSED TO THE HOMEOWNER AS PER SKAGIT	
13 11112 CODE 240-2/2A-0015 and 0270	
1. Maintenance & Monitoring Paguing 1 mg	
or more frequent as required scheduled maintenance and monitoring.	uai
2. Contract Required: A contract for never lead to the contrac	
onsite sewage disposal system is put into use.	he
3. Maintenance Specialist Required: The second	
3. Maintenance Specialist Required: The person performing this service must be certified by the Skag County Health Department.	it
I have read and fully and an analysis	
I have read and fully understand the conditions contained within this notification.  For witnessing or attesting a signature: State of Washington, County of Skagit	•
SHERYL A. S.	
CONTENT ON THE CONTENT OF THE CONTEN	i
(2)	<b>品</b> 】
(Owner signature) Cuch Jundate 10 3107 ST PUBLIC V	<b>[D]</b>
(Owner signature)	
Menyl U. Strunden date 10/31/07 My appointment expires 8/3/12011	1
date 10/31/0 ( My appointment expires 8/3/170)/	1