

ADVANCED SEPTIC TREATMENT SYSTEMS, INC.

for the real property, subsequent to system installation.

8000 PARKER RD.

SEDRÓ-WOOLLEY, WA 98284 PHONE: (360) 856-2142/0550

FAX:

(360) 856-0551

Page: 1 of 2	TRD1000 MAINTENANCE AGREEME	NT CONTRACT Chicago Title IC44203
		Escrow BE11739
GRANTOR: AI	DVANCED SEPTIC TREATMENT SYSTEMS, I	NC.
GRANTEE:	Aaron R. Darragh and Mischelle S	Darragh #189
	NAMES ON PAGE:	
GRANTEE PHO	ONE #: (360) 630-5212	
ABBREVIATE	D LEGAL DESCRIPTION: Lot 21, Bay	Meadows, according to the
2005112801	eof, recorded November 28, 2005, 1 80, records of Skagit County,Wash	dington.
ASSESSOR'S P	PROPERTY TAX PARCEL#: P-123863	
ACCOUNT # _	4876-000-021-0000	
PROPERTY AL	DDRESS: 14325 Road Runner Lane, E	Surlington, WA 98233
DESIGNER AD	DRESS: L. Benjamin 701 Cascade Pal	m Crt. Sedro Woolley, WA 98284
The purpose for System installed	r this contract is to insure the continued service lat; the above tax parcel address	and operation of the TRD Wastewater
This contract d	ocuments the agreement between the property of inspection of the TRD-1000 plant. This document	owner and the service provider for the at shall be properly recorded with the title

This contract is in effect upon installation of the plant, and shall be in effect, until the system is decommissioned by the property owner or service provider. The service provider has the right to transfer this contract to another service provider as long as the new service provider has been certified to service the system.

The service provider will semi annually or as approved by the septic designer, inspect the plant to ensure proper operation. This inspection will consist of a visual inspection of the plant internals, observance of the plant effluent for odor, color, and turbidity, and recording the results.

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- 1. The property owner will notify the service provider in the event of any alarms or other abnormal conditions relevant to the TRD and operate the system in accordance with the guidelines set down by the State of Washington or () the local Department Of Health.
- 2. Any effluent samples required by local D.O.H. jurisdiction and costs thereof are the direct responsibility of the property owner. Pumping costs are the direct responsibility of the property owners.
- 3. Residential TRD 1000 systems installed will be serviced at the rate of \$25.00 per month. Billed annually on July I of each year for a total of \$300.00. The first bill will be due two years after the date of installation, and will be prorated from said date to July 1. Thereafter, billing will be annually and due July 1 of each year. It must be noted that this \$25.00 per month or \$300.00 per year is subject to change to keep pace with the cost of materials, labor and changes in state and local D.O.H. or other permitting agency requirements. Residential TRD1000 systems requiring additional maintenance, and commercial properties will be serviced at a cost to be determined at the time of design approval.
- 4. Your state Health Department may require additional separate equipment to function in conjunction with equipment manufactured by A.S.T.S., Inc. A.S.T.S., Inc. is not responsible for servicing, Mechanical or electrical safety of such equipment that is not manufactured or supplied with the aerobic treatment unit by A.S.T.S., Inc. Particular care should be used in evaluating the electrical or mechanical safety of equipment manufactured by separate manufacturers. This may include, but not be limited to electrical control panels or pumps.
- 5. At the option of A.S.T.S., Inc. the sole and exclusive liability of this company shall be a refund of the service contract purchase price for the year. In no event shall A.S.T.S., Inc. be liable for any direct or indirect, incidental, consequential or special damages whatsoever arising out of this agreement by a prevailing party in any arbitration, action or appeal. Court awarded decisions will be assigned by the County of Skagit, in Washington State. This agreement will be governed by and construed under the laws of the State of Washington.
- 6. The owner of the residence or facility served by the A.T.U. is responsible for assuring the proper operation and providing timely maintenance of the A.T.U. and all other components of the on-site Wastewater Treatment and Disposal System. Your state may have other recommendations or requirements, other than those listed above. These must be addressed by your wastewater system designer.

NAME OF GRANTEE: AARON R. DARRAGH

MISCHELLE S. DARRAGH

SIGNATURE OF GRANTEE: GRANTEE: Deway !

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STATE OF WASHINGTON COUNTY OF SKAGIT

I certify that I know or have satisfactory evidence that Aaron R. Darragh and Mischelle S. Darragh

(is/are) the person(s)

who appeared before me, and said person(s) acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in this instrument.

Dated: 12-12-

Marcia J. Jennings

Notary Public in and for the State of Washington

Residing at Sedro Woolley

My appointment expires: 10/5/2008

O NOTARY TO SUBLIC SOLUTION OF WARMING

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