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PETER BROWNING, DIRECTOR HOWARD LEIBRAND, M.D., HEALTH OFFICER CORINNE STORY, ENVIRONMENTAL HEALTH SUPERVISOR PHONE: (360) 336-9380 FAX: (360) 336-9401



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)

	i a g (Debion)	
GRANTOR: (NAME OF OWNER)	Caylow Lootens	
GRANTEE: SKAGIT COUNTY		
ADDRESS	13113 6 lenwood DR M. Verno	<u>n</u> _
PARCEL#_(02159		
LEGAL DESCRIPTION:		
Bingham ac-	acres 1.33 Tax PA	

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

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	NOTARY PUBLIC STATE OF WASHINGTON
(Owner signature) Carpler later date 7/2//08	PAMELA G ALDRIDGE  My Appointment Expires Nov. 20. 2009
Signed or attested before me on 7-21-0 by (Signature of Notary)	
	ment expires_11-20-09