

Skagit County Auditor

9/10/2008 Page

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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)

GRANTOR: (NAME OF OWNER) RICHARD + Lynne Muñoz
GRANTOR: (NAME OF OWNER) A CHAYA + LYNNE ITUMOZ
GRANTEE: SKAGIT COUNTY ADDRESS 23184 West Share Drive, MEVERYON WA 90074
ADDRESS 23184 West Share Drive, MEVERYON WA 1839
PARCEL#
LEGAL DESCRIPTION:
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THE FOLLOWING INFORMATION HAS BEEN DISCLOSED TO THE HOMEOWNER AS PER SKAGIT
COUNTY CODE 12.05,120 AND WASHINGTON ADMINISTRÂTIVE 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

f	(Owner signature) TPHY IMMUN date 8-37.68	
	Signed or attested before me on 8-27-08 by (Signature of Notary)  Online (Min date 8-27-08 My appointment expires	9/2/05