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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



Always working for a safe and healther Shaget county

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

OPERATION-MAINTENANCE & MONITORING REQUIREMENT FOR PROPRIETARY ONSITE SEWAGE SYSTEMS

GRANTOR: (NAME OF OWNER) MELLOUM, WILLIAM J. GRANTEE: <u>SKAGIT COUNTY</u> ADDRESS <u>13775 GIBERITER ROAD, HNACORTES</u> PARCEL #_<u>PILSZO3</u> LEGAL DESCRIPTION:

LOT 1, (SP) PLOG - 03-51

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

9-9-08 (Owner signature) q. -08

Signed or attested before me on (-4.00) by (Signature of Notary)

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CLOSSON ARIE Own NOTAR PUBLIC 2008 17. OF WAS

-9-08 My appointment expires 12-31-08