Return Name & Address: Bethany Davidson, 1 POBOX 22310 Milwankie, OR 972 503-659-1240 ext		200810290012 Skagit County Auditor 10/29/2008 Page 1 of 2 9:38AM
Development A	TITLE NOTIFICAT Activities On or Adjacent to Desig Pursuant to SCC 14.1	nated Natural Resource Lands
Grantee: Skagit County Plan Property I.D. #: P51090 Permit Number: BP08-081 Legal Description: ALL OF	SEC 22 G/F-75	Assessor Tax #:360522-0-001-0006
Notice: "This parcel lies with (agricultural, forest or mineral resource Land common-resource uses and may be chemicals; or from spraying, progenerates traffic, dust, smoke operations as a priority use of accept such incompatibilities, operations when performed in the case of mineral lands, apcrushing, stockoiling, blasting.	in an area or within 500 feet of a resource lands of long-term comme ercial activities occur or may occur inconvenient or cause discomfort truing, harvesting, or mineral extract, noise, and odor. Skagit County in designated Natural Resource La inconveniences or discomfort from compliance with Best Management plication might be made for mining transporting and recycling of minerals.	an area designated as a natural resource land cricial significance) in Skagit County. A variety of ar in the area that may not be compatible with a area residents. This may arise from the use of tion with associated activities, which occasionally has established natural resource management ands, and area residents should be prepared to mormal, necessary Natural Resource Land Practices and local, State, and Federal law." In greated activities including extraction, washing, areals. If you are adjacent to designated Natural led NRL lands consistent with SCC 14.16.810.
Within: Rural Resource Adjacent: Rural Resource	Agriculture Industrial Forest Se Property Owner's Signature	econdary Forest Mineral Resource Overlay econdary Forest Mineral Resource Overlay
	State of Washington, County of before me	Notary Public, personally appeared
	to be the person whose name is acknowledged that he/she execu	personally known to me subscribed to this instrument, and uted it.
Witness my hand and office	ial seal:	
Notary's Signature		Notary Public in and for the State
of Washington residing at	N	My Commission Expires:

ACKNOWLEDGMENT

State of California	
County of Shasta)
On 0000 8 2008	before me, Susan E. Witherspoon, Notary Public
	(insert name and title of the officer)
personally appeared	M. D. Emmerson
subscribed to the within instrume his/her/their authorized capacity(of satisfactory evidence to be the person(s) whose name(s) is/are tent and acknowledged to me that he/she/they executed the same in (ies), and that by his/her/their signature(s) on the instrument the half of which the person(s) acted, executed the instrument.
I certify under PENALTY OF PEF paragraph is true and correct.	RJURY under the laws of the State of California that the foregoing
	SUSAN F WITHERSPOON E
WITNESS my hand and official s	ieal. COMM. NO. 1706757 Solution of the country Public California Shasta country
	MY COMMISSION EXPIRES NOVEMBER 21, 2010
Signature LUMINE . DU	Hullspoon (Seal)

10/29/2008 Page

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