

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)	TERRY F SAPP & JEAN R. EAGLESTON
GRANTEE: SKAGIT COUNTY	
ADDRESS 26923 HOEHN	RD SEDRO-WOOLLES, WA 98284
PARCEL # <u>\$68000</u>	
EGAL DESCRIPTION:	
PENUEY'S AC IACTA.	& HOUSE IN Lots 29 \$ 32 BLK 2 1.00 AC OPER
SPACE #64 #800309	

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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(Owner signature) Lan R. Englistan date 4-10-200	¥OTAR:
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Signed or attested before me on by (Signature of Notary	ointment expires <u>C/29/2012</u>
une ///o/co / my app	omanion expires <u>67 c 17 ct 187</u>