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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) Rebica Andelson GRANTEE: SKAGIT COUNTY ADDRESS 12986 Maje A.L. Clear Loke
PARCEL #\_4144-022-002-0001 P75069

LEGAL DESCRIPTION:

PLA BLOCK 15, CLEAR LOKE PLA BLOCK22, W. Add'A to CLEAR LOKE

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 usc.
- 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

(Owner signature) Position EldE date 6/5/09

Signed of attested before me on Sums 5,1000 by (Signature of Notary)

date 6/6/09 My appointment expires 4.4.27,2012

Notary Public
State of Washington
BLANE W. ROGALLA
MY COMMISSION EXPIRES
August 27, 2012