

Nonthun Ruga Der PO Box 315 Bow, WA 98332

## GUARDIAN NORTHWEST TITLE CO. ACCOMMODATION RECORDING ONLY

PETER BROWNING, DIRECTOR

HOWARD LEIBRAND, M.D., HEALTH OFFICER CORINNE STORY, ENVIRONMENTAL HEALTH SUPERVISOR

PHONE: (360) 336-9380 FAX: (360) 336-9401



Skaget County

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: (NAM	ME OF OWNER)	$-\mathcal{N}$	orthern	Reign	Development
GRANTEE: <u>SKAC</u> ADDRESS	SUMME!	leaf	Lune	50010	Woolley
PARCEL# LEGAL DESCRIP	712.7947 TION:			wi.	(
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as recorded under AFN 200810070082

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

Nonthen Regul y B.	Teresa L. Huynh Notary Public
(Owner signature) Must John date 8	State of Washington Comm. Expires Dec. 14, 2011
Signed or attested before me on by (Signature of N	lotary)
Louisa of Huyl date 8/3/69 My	y appointment expires 12/14/11