



200912150020

Skagit County Auditor

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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) Kaulana Kocina, LLC, Randy M. Rogers, manager
GRANTEE: SKAGIT COUNTY
ADDRESS 5106 POTLATCH LANE, ANACORTES
PARCEL # P28042
LEGAL DESCRIPTION:

PLAT OF POTLATCH BEACH, LOT 14; IN SEC. 35,
TWIN 30, RG. 01

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:

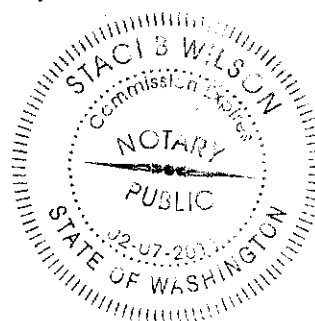
1. Maintenance & Monitoring Required: The septic system to be installed on this lot will require annual or more frequent as required scheduled maintenance and monitoring.
2. Contract Required: A contract for perpetual maintenance and monitoring must be obtained before the onsite sewage disposal system 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

(Owner signature) RS mfg date 12/07/2009

Signed or attested before me on 12/17/09 by (Signature of Notary)


Staci B Wilson date 12/17/09 My appointment expires 2/7/11



PROOF OF OWNERSHIP CERTIFICATE

This is to certify that I, Randy M. Rogers, am a Member and Manager of the Washington Limited Liability Company, Kaulana Ko Olina, LLC, owner of property located at 5106 Potlatch Lane, Anacortes, WA (Parcel No. P68042).

As Manager of the aforementioned limited liability company, I have authority to execute documents and agreements on its behalf.

Signed 
Randy M. Rogers
Manager, Kaulana Ko Olina, LLC

Date 12/07/2009

STATE OF Washington, COUNTY OF King, ss.:

On this day, personally appeared before me

Bandy M. Rogers
to me known to be the person(s) described in and who executed the within and foregoing instrument, and acknowledged that he/she signed the same as his/her voluntary act and deed, for the uses and purposes therein mentioned.

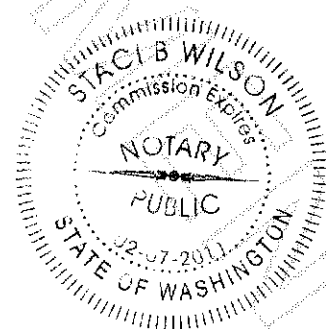
Witness my hand and official seal hereto affixed

this 7th day of December, 2009.

Staci B. Wilson

Notary Public in and for the State of Washington.

My commission expires 2/7/11.



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