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Skagit County Auditor

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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) Islands Back River MITCHELLE  
GRANTEE: SKAGIT COUNTY  
ADDRESS 246 OLD HWY 99 N  
PARCEL # 48996  
LEGAL DESCRIPTION: 15.8 Acres, PTN Lot 5 w of old hwy 99  
6-36-4 ETAL

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) [Signature] date 3-29-2011

Signed or attested before me on 3-29-11 by (Signature of Notary)

[Signature] date 3-29-11 My appointment expires 08-20-2014

\* River Mitchell  
Appeared before  
me \*

