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Skagit County Auditor

**PETER BROWNING, DIRECTOR**  
**HOWARD LEIBRAND, M.D., HEALTH OFFICER**  
**CORINNE STORY, ENVIRONMENTAL HEALTH SUPERVISOR**  
PHONE: (360) 336-9380 FAX: (360) 336-9401



"Always working for  
a safer and healthier  
Skagit 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: (NAME OF OWNER) David Kemble  
GRANTEE: SKAGIT COUNTY  
ADDRESS 19902 Karla Ct Mt Vernon WA  
PARCEL # P102180 Lot #2  
LEGAL DESCRIPTION: SW11-0080  
sect 20 Twp 33 Rge 04  
1.44 AC

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:

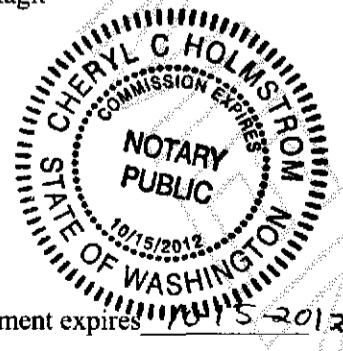
- 1. Maintenance & Monitoring Required: The septic system to be installed on this lot will require annual or more frequent as required scheduled maintenance and monitoring.
- 2. Contract Required: A contract for perpetual maintenance and monitoring must be obtained before the onsite sewage disposal system 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) David Kemble date 5-2-11

Signed or attested before me on May 2nd 2011 by (Signature of Notary)

Cheryl C Holmstrom date 5-2-11 My appointment expires 10/15/2012



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