

Skagit County Auditor

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PETER BROWNING, DIRECTOR HOWARD LEIBRAND, M.D., HE L'TH OFFICER CORINNE STORY, ENVIRONMENTAL HEALTH SUPERVISOR PHONE: (160) 336-9380 FAX: (360) 336-9401

OPERATION-MAINTENANCE & MONITORING REQUIREMENT FOR PROPRIETARY ONSITE SEWAGE SYSTEMS

NOTICE OF ON-SITE SEWAGE SYSTEM MAINTENANCE AGREEMENT REQUIREMENT (DESIGN)

ANTOR (NAME OF OWNER)

GRANTOR: (NAME OF OWNER) JULIE HOLTISON
GRANTEE: SKAGIT COUNTY
ADDRESS 14245 Fye of the Isle Rd, Mycorter 9772
PARCEL#
LEGAL DESCRIPTION. P64676
WA

plat recorded in volume 8 of plats, pages 51 and 63, records
THE FOLLOWING INFORMATION HAS BEEN DISCLOSED TO THE HOMEOWNER AS PER SKAGIT OF 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 the best 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 : Washington, County of Skagit

MICHAEL C. BISHOP STATE OF WASHINGTON NOTARY PUBLIC MY COMMISSION EXPIRES 05-19-16

(Owner signature)	am	_date_6/2	(2012	<u> </u>	
Signed or attested before me on	6/2/12 by	(Signature of)	delle len	1121	
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