



Skagit County Auditor

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\$72.00

1 12:19PM



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) Windward Real Estate Services Inc.

GRANTEE: SKAGIT COUNTY

ADDRESS Not assigned at this time.

PARCEL # P130052 / 4991-000-009-000

LEGAL DESCRIPTION:

**Lot 9 of the plat of Creekside Meadows, AF 201002090002, being a portion of Sec 23,
TWP 34, RGE 4**

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)

date 2.10.15

Signed or attested before me on 02/10/15 by (Signature of Notary)

Andrew D Marshall date 02/10/15 My appointment expires 03/06/17

