

Skagit County Auditor

\$72.00

7/14/2015 Page

2:14PM

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) GRANTEE: SKAGIT COUNTY

ADDRESS_ FOR 11910 NEW MORNING DR. ANACORTES

PARCEL # PIOISIG LEGAL DESCRIPTION:

TRACT "V "OF SURVEY RECORDED AF#9204200040, BEING A PORTION OF SE /4 SE /4 31-35-2 SURVEY AF# 201205040049. AT FIDALGO BAY ESTATES, FIDALGO BAY ADDITION TO ANACORTES # 3841

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) Kaney & Shea date 7/8/15
Signed or attested before me on 7/8/15 by (Signature of Notary) aned or attested before me on 7/8/15 by (Signature of Notary)

MASS

date 7/8/15 My appointment by prince of Notary)