

Skagit County Auditor

\$73.00

4/29/2016 Page

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SW16-0087

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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

PARCEL#

21367 CONWAY WILE D.S. PIZ7653 / 330 420 (1-019-0400

LEGAL DESCRIPTION:

LOT SP PLOT-0138 20/33/04

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 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

mac on

(Owner-signature)

Signed or attested

by (Signature of Notary)

4-U-16 My appointment expires 000

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