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Skagit County Auditor

\$73.00

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JENNIFER JOHNSON, DIRECTOR  
HOWARD LEIBRAND, M.D., HEALTH OFFICER

PHONE: (360) 416-1555 FAX: (360) 336-9416



"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) JASON QUATSOE  
GRANTEE: SKAGIT COUNTY  
ADDRESS 10594 BAY MEADOWS LANE  
PARCEL # P123867  
LEGAL DESCRIPTION:

LOT 25 BAY MEADOWS  
SEC 28, TWP 35 R 3

SW116-0107

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) [Signature] date 5/20/16

Signed or attested before me on 20<sup>TH</sup> MAY by (Signature of Notary)

Tawnee Clearbrook date 5/20/16 My appointment expires 11/10/17

