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Skagit County Auditor

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Always working for
a safer and healthier
Skagit County

JENNIFER JOHNSON, DIRECTOR
HOWARD LEIBRAND, M.D., HEALTH OFFICER
PHONE: (360) 416-1555 FAX: (360) 419-3408

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) TIMOTHY NELSON & CHERYL ABBOTT NELSON
GRANTEE: SKAGIT COUNTY
ADDRESS 5675 CAMPBELL LAKE RD. ANACORTES
PARCEL # P19244
LEGAL DESCRIPTION: 1 ACRE BEG ON N LI CC RD 40RDS W OF LI BTW
LTS 4 & S SEC 12 TH N 200FT M/L E 200FT S 200FT S 200
M/L W 200FT TPB

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 proposed septic system for this lot will require annual inspections or more frequently as deemed necessary by Skagit County Public Health Department.
2. Maintenance Specialist Required: The person performing this service must be certified by the Skagit County Public 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

Clyde G. Williams

Signed or attested before me on

7/14/16

by (Signature of Notary)

Clyde G. Williams

Date

7/14/16

My appointment expires

7/9/19

