

UNOFFICIAL



Skagit County Auditor \$73.00
9/30/2016 Page 1 of 1 11:21PM

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)

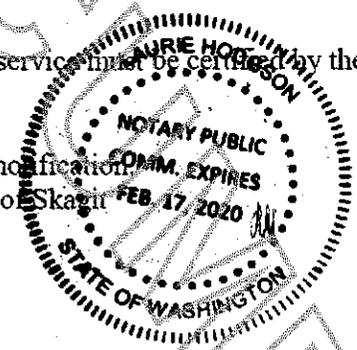
GRANTOR: (NAME OF OWNER) Malia Christiansen
GRANTEE: SKAGIT COUNTY
ADDRESS 12830 Summit Trail Ln. Anacortes
PARCEL # P130496
LEGAL DESCRIPTION:

LOT 2 SKAGIT COUNTY SHORT PLAT #P10-0206
BEING A PORTION OF LOT 1 OF SKAGIT CO. SHORT PLAT
P104-0070 BEING A PORTION LOCATED IN SECTION 4,
TOWNSHIP 34 NORTH, RANGE 2 EAST.

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 Malia E. Christiansen Date 9/22/2016

Signed or attested before me on 9/22/16 by (Signature of Notary)
Laurie Johnson Date 9/22/16 My appointment expires 02-17-2020