

Skagit County Auditor 7/20/2017 Page

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JENNIFER JOHNSON, DIRECTOR HOWARD LEIBRAND, M.D., HEALTH OFFICER PHONE: (360) 416-1500 FAX: (360) 416-1565



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)	Hoyer Homes, LLC
GRANTEE: SKAGIT COUNTY ADDRESS Hoxie Lane	
PARCEL # P126150	
LEGAL DESCRIPTION:	
THE NORTH 25.00 FEET OF LOT 11, ALI	L OF LOT 12 AND THE SOUTH 25,00 FEET OF LOT 13, BLOCK 141, INCLUSI

THE NORTH 25.00 FEET OF LOT 11, ALL OF LOT 12 AND THE SOUTH 25.00 FEET OF LOT 13, BLOCK 141, INCLUSIVE AS PER THE MAP OF FIDALGO CITY, SKAGIT COUNTY, WASHINGTON, RECORDED IN VOLUME 2 OF PLATS, PAGES 113 AND 114, RECORDS OF SKAGIT COUNTY, WASHINGTON. TOGETHER WITH A PORTION OF THAT CORRECTION QUIT CLAIM DEED, FILED UNDER A.P. NO. 950502075, SAID PORTION BEING VACATED STREETS AND ALLEYS AS WOULD BE ATTACHED TO THE ABOVE DESCRIBED PARCEL BY OPERATION OF LAW. PARCEL D1 OF SURVEY AF#201706160061

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 Rublic 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 signatu	re to	<u> </u>	Date7/19/4	5/1
Signed or attes	ted before me on $\frac{7}{19}$	by (Signature	of Notary)	
Marie 1	K Eirglish	Date7/19/17	_My appointment expires_	12/4/19/
	NOTARY PUBLIC STATE OF WASHINGT MARIE K, ENGLIS MY COMMISSION EXPIRI DECEMBER 4, 2019	SH .		