

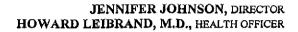
Skagit County Auditor

\$74.00

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3:01PM



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



OPERATION-MAINTENANCE & MONITORING REQUIREMENT
FOR PROPRIETARY ONSITE SEWAGE SYSTEMS

"Always working for a safer and healthcer Skagit County"

SW17-0300

This form must be recorded before permit approval
NOTICE OF ON-SITE SEWAGE SYSTEM MAINTENANCE AGREEMENT REQUIREMENT
(DESIGN)

GRANTOR: (NAME OF OWNER) BYOM JOO	185+ Amy Jones
GRANTEE: SKAGIT COUNTY	
ADDRESS 0818 Exstus 20	
PARCEL #	
LEGAL DESCRIPTION:	
LOT3 0/ PLOG-1052 / 3503-02	. / 350302-4-006-0600
	•

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)

Signed or attested before me on 10/5/14 by (Signature of Notary)

anderson date 10/5/2017 My appointment expires 08/18/2021

NDERSON