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Skagit County Auditor

\$74.00

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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)

Shirley R Scott

GRANTEE: SKAGIT COUNTY

ADDRESS

PO Box 154, Bow WA 98232

PARCEL # P68801

LEGAL DESCRIPTION:

(0.71 ac) Lot 10, West 1/2 of lot 14, and all of Lot 15, Sanish Shores Plat, Skagit Co. WA,
as per plat recorded in volume 3 of plats, pages 7 and 7A, records of Skagit Co.,
Wa. Survey AF# 201706260178

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)

Shirley R Scott

date

11 Oct 2017

Signed or attested before me on 10/11/2017 by (Signature of Notary)

Deborah Heitman

date

10/11/2017

My appointment expires

08/10/2021

