

201812170187

12/17/2018 02:22 PM Pages: 1 of 1 Fees: \$99.00  
Skagit County Auditor

JENNIFER JOHNSON, DIRECTOR  
HOWARD LEIBRAND, M.D., HEALTH OFFICER

PHONE: (360) 416-1550 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)

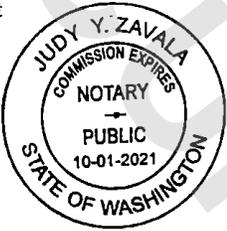
GRANTOR: (NAME OF OWNER) WALTER MARTINEZ  
GRANTEE: SKAGIT COUNTY  
ADDRESS 24917 STONEWOOD DR. MOUNT VERNON, WA 98274  
PARCEL # P17967  
LEGAL DESCRIPTION: (5.000.00) LOT 23 OF SURVEY RECORDED 11/27/74.  
IN VOLUME 1 OF SURVEYS, PAGE 113, UNDER AUDITORS FILE # 809880 RECORDS  
OF SKAGIT COUNTY, WA. BEING A PORTION OF THE EAST 1/2 OF NE QUARTER OF NE  
QUARTER OF SE QUARTER OF SECTION 6, TOWNSHIP 33 NORTH, RANGE 5 EAST,  
W.M.

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) [Signature] date 12/17/18  
Signed or attested before me on December 17, 2018  
by (Signature of Notary) [Signature]



[Signature] date 12-17-18 My appointment expires 10-01-2021