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Skagit County Auditor

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

PHONE: (360) 416-1550 FAX: (360) 336-9416



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) Thomas Slyngstad  
GRANTEE: SKAGIT COUNTY  
ADDRESS 16156 Ascension Way Mount Vernon, WA 98273  
PARCEL # 134337  
LEGAL DESCRIPTION:

Lot 4 SP PLOT-0302 NE 25/34/04

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) Thomas Slyngstad date 10/15/2019

Signed or attested before me on Oct. 15, 2019 by (Signature of Notary)

Sharon Hawkins date 10/15/19 My appointment expires March 1, 2023

