



202007200135

07/20/2020 11:20 AM Pages: 1 of 1 Fees: \$103.50
Skagit County Auditor

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) BRIAN ADAMS
GRANTEE: SKAGIT COUNTY
ADDRESS 14284 EYE OF THE ISLE RD.
PARCEL # P64697
LEGAL DESCRIPTION: (0.2400 ac) CRATER LAKE BEACH CLUB
No. 1 LOT 43

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 Public 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 signature

Brian Adams

BRIAN ADAMS

Date 7/20/20

Signed or attested before me on 7/20/20 by (Signature of Notary)

Marie Henry

Date 7/20/20

My appointment expires 12/20/23

