



202101190003

01/19/2021 08:32 AM Pages: 1 of 1 Fees: \$103.50
Skagit County Auditor

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

PHONE: (360) 416-1555 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) CHRISTOPHER PEDER
GRANTEE: SKAGIT COUNTY
ADDRESS 7740 CYPRESS WAY
PARCEL # 66087
LEGAL DESCRIPTION:

LOT 2, BLK B, HOLIDAY HIDEAWAY No. 1; in Sec. 8,
TWN. 35, Rg. 02.

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) Christopher Peder date Jan 11, 2021

Signed or attested before me on 1/11/2021 by (Signature of Notary)

Alejo Reyes date 1/11/2021 My appointment expires 05/09/2023

