202108190007

08/19/2021 09:07 AM Pages: 1 of 1 Fees: \$203.50

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) EMMY + PAUL WOLFE
GRANTEE: SKAGTT COUNTY ADDRESS 22299 Willabelle PI, Mt. Vernon, MA 98274
PARCEL #
3 bedroom gravity of Fast pump
Lot 7, Plat of willabelle estates

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:

- 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.
- 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 Snowows A

Owner signature Sully Date 8/18/21

Signed or attested before me on 8/18/221 by (Signature of Notary)

Date 8/18/201/My appointment expires 4-29-2024

JOHN W. RUSSELL

NOTARY PUBLIC

NOTARY PUBLIC STATE OF WASHINGTON MY COMMISSION EXPIRES 04/29/2024 LICENSE # 100242