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09/22/2021 02:18 PM Pages: 1 of 1 Fees: \$203.50 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)_	Richard	Green	
GRANTEE: SKAGIT COUNTY ADDRESS 20355 Benson			98274
ARCEL # Y (30356 EGAL DESCRIPTION:			. ,
Lot 25 Sarati	ga Passa	age View	

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

O(M)	
owner signature Date 9-21-21	
igned or attested before me on 09/21/202 by (Signature of Notary)	
Date 09/21/2011 My appointment expires 04/13/202	<u>7</u> 5
CRISTA HARRIS NOTARY PUBLIC #21025745	
STATE OF WASHINGTON	
COMMISSION EXPIRES	
APRIL 13, 2025	