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10/01/2021 10:49 AM Pages: 1 of 1 Fees: \$203.50
Skagit County Auditor

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

PHONE: (360) 416-1555 FAX: (360) 336-9416



"Always working for
a safer and healthier
Skagit County"

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)

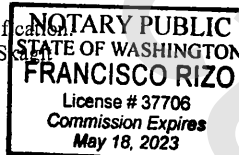
GRANTOR: (NAME OF OWNER) Eric Jolley
GRANTEE: SKAGIT COUNTY
ADDRESS 5334 SOUTH SHORE DRIVE
PARCEL # 109112
LEGAL DESCRIPTION:

LOT 2, SHORT PLAT 90-75, RECORDED UNDER
AF# 9104160001. 12/35/01

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) [Signature] date 9/20/21

Signed or attested before me on 9/20/21 by (Signature of Notary)

[Signature] date 9/20/21 My appointment expires 5/18/2023