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Skagit County Auditor

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

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"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) JEFF CLARK
GRANTEE: SKAGIT COUNTY
ADDRESS 15893 & 15899 YOKERD DRIVE, ANACORTES, WA 98221
PARCEL # P64846
LEGAL DESCRIPTION:

TRACTS 2 & 3 DECEPTION PASS WATERFRONT TRACTS, w/ VACATED AREAS &
WITH TIDE LANDS, AS RECORDED IN AFF# 200907010002 & AFF# 200910130112.
IN SEC. 24, T4N. 30, R9. 01E.

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 5/27/22

Signed or attested before me on 5/27/22 by (Signature of Notary)

[Signature] date 5/27/22 My appointment expires 3/22/26

