## 202406240041

After Recording Return To:

06/24/2024 12:42 PM Pages: 1 of 1 Fees: \$303.50 Skagit County Auditor



GRANTOR: (Name of Property Owner)\_

GRANTEE: Skagit County

PARCEL: <u>P47349</u> LEGAL DESCRIPTION:

## Skagit County Public Health

Keith Higman, Director Howard Leibrand, M.D., Health Officer

## 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)

ADDRESS: 10529 Samish Island Rd Bow WA 98032

| GL 2 35/36/02  |  |
|--|--|
| 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:   |  |
| <ol> <li>Maintenance &amp; 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.</li> </ol>   |  |
| <ol><li>Maintenance Specialist Required: The person performing this service must be certified by the Skagit<br/>County Public Health Department.</li></ol>   |  |
| I have read and fully understand the conditions contained within this notification.  |  |
| DATED this <u>24</u> day of <u>Sune</u>  | . 20 24 .  |
|  | Property Owner   |
| State of Washington ) )ss. County of Skagit )  |  |
| Signed or attested before me on the 74, 200 by  NOTARY PUBLIC  NOT | Printed Vame: Judy 20Vala Notary Public in and for the State of Washington My commission expires: 10-01-2025 |