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06/05/2026 08:38 AM Pages: 1 of 2 Fees: \$354.50
Washtenaw County Auditor

Document Title: Maintenance Agreement

Reference Number:

Grantor(s):

additional grantor names on page ___

1. Caos LLC

2.

Grantee(s):

additional grantee names on page ___

1. Washtenaw County

2.

Abbreviated legal description:

full legal on page(s) ___

Lt 1, Revised Short Plat No. 64-77.

Assessor Parcel / Tax ID Number:

additional tax parcel number(s) on page ___

P62510

I, Heather Schuh, am hereby requesting an emergency non-standard recording for an additional fee provided in RCW 36.18.010. I understand that the recording processing requirements may cover up or otherwise obscure some part of the text of the original document. Recording fee is \$303.50 for the first page, \$1.00 per page thereafter per document. In addition to the standard fee, an emergency recording fee of \$50.00 is assessed. This statement is to become part of the recorded document.

Signed

Dated

6/5/24

After Recording Return To:



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)

GRANTOR: (Name of Property Owner) CAOS LLC.
GRANTEE: Skagit County
ADDRESS: rha Patrick Lane Burlington WA
PARCEL: P12510/386-000-024-0509

LEGAL DESCRIPTION:
(C. 4801e) Lt. 1 Revised short plat No. 44-77, Dec No. 871786,
(D142) Being PTIN Tract 3e, Plat of the Burlington Acreage
Property

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 proposed septic system for this lot will require annual inspections or more frequently as deemed necessary by Skagit County Public Health Department.
2. Maintenance Specialist Required: The person performing this service must be certified by the Skagit County Public Health Department.

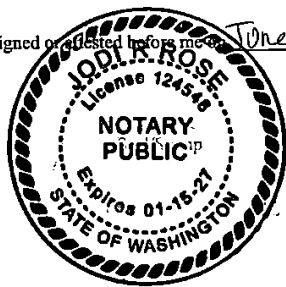
I have read and fully understand the conditions contained within this notification.

DATED this 4th day of June, 2026.

[Signature]
Property Owner

State of Washington)
)ss.
County of Skagit)

Signed and attested before me on June 4, 2026 by Heather Schuh (grantor).



Joai Rose
Printed Name: Joai Rose
Notary Public in and for the State of Washington
My commission expires: 1-15-2027