



"Always working for  
a safer and healthier  
Skagit County"

**Public Health & Community Services  
Environmental Public Health Division**

1800 Continental Place, Mount Vernon, WA 98273  
Telephone (360) 336-9474; FAX (360) 419-3408

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## **Approval Packet**

### **Residential Two Connection Group B Public Water System**

Approval of an application for a building permit or land division requires that the applicant demonstrates there is an adequate (water quantity) and safe (water quality) water supply for the property. This plan review and approval packet must be used if the applicant chooses to obtain approval of a water supply from one drilled well that serves one residence on each of two properties (two residences total).

- ☆ This application is **NOT** for gaining approval of a water system that will serve either a business or more than two residences. It is important for the applicant to know that an Accessory Dwelling Unit that has a water supply is considered to be a residential connection to the water system in addition to the primary residence.
- ☆ This application may **NOT** be used if the source of water is anything other than a drilled well.

A complete application for approval of a Residential Two Connection Group B Public Water System includes the following items in the checklist below. The application and a detailed description of these requirements are provided with this packet.

- Application** (the next 2 pages of this packet)
- Water Well Report** (sometimes called a "well log")
- Well pump test and recovery test results**
- Water quality test results**
- Pumphouse design/construction diagram**
- Site plan (drawn to scale)**
- Notice To Future Property Owners** (submit the draft – not yet recorded with the Auditor)
- Plan review fee payment** (\$450.00: no credit or debit cards can be accepted)

02/11/2014 wb

**Skagit County Public Health and Community Services**

1800 Continental Place, Mount Vernon, WA 98273

Telephone (360) 336-9474 --- fax (360) 419-3408

Internet: [www.skagitcounty.net/health](http://www.skagitcounty.net/health)

**Application For Approval (two pages)**

**Residential Two Connection Group B Public Water System**

Applicant: \_\_\_\_\_

Applicant Phone: (1) \_\_\_\_\_, (2) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Contact Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

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▶ Project Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

▶ Proposed public water system: Name of water system: \_\_\_\_\_

Owner of water system: \_\_\_\_\_

▶ Well Site Address or Parcel #: \_\_\_\_\_

▶ What are the two properties with a residence to be served by this public water system?:

Parcel #1 \_\_\_\_\_ created/platted on (date): \_\_\_\_\_

Parcel #2 \_\_\_\_\_ created/platted on (date): \_\_\_\_\_

► **The well site was approval by which one of the following:**

\_\_\_ Licensed well driller

\_\_\_ Skagit County Public Health Department

► **Well site location information:**

Is it protected from flooding surface, or subsurface drainage? Yes\_\_\_ No\_\_\_

The nearest property line is \_\_\_\_\_ feet away from the **well site**.

The nearest property line is \_\_\_\_\_ feet away from the **reserved well site**.

► **Will the two properties to be served have on-site sewage systems or be connected to a public sewer?:** \_\_\_ On-site sewage system \_\_\_ Public Sewer

► **Well setbacks:** distances (in feet) from the well site and reserved well site to existing and planned potential sources of contamination:

	<u>To the well site:</u>	<u>To the reserved well site:</u>
Nearest septic tank	_____ feet	_____ feet
Nearest septic drainfield	_____ feet	_____ feet
Nearest septic drainfield replacement area	_____ feet	_____ feet
Nearest sewage/septic transport pipe	_____ feet	_____ feet
Nearest public road right of way	_____ feet	_____ feet
Nearest surface water	_____ feet	_____ feet

Are there any underground or above ground chemical or fuel storage tanks, railroad tracks, manure lagoons, animal pastures, or other potential sources of well contamination with 200 feet of the well or reserved well sites? If there are, describe them and the distances to them from the well and reserved well site:

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**The information provided in this application is accurate and true to the best of my knowledge. It is based upon conditions and information that I have researched at the time of application. I, the applicant, understand that this application is for approval of the proposed public water system to serve only two residences/dwellings, one on each property listed in this application.**

**Information to help the applicant understand the approval requirements:**

**Regulations associated with Residential Two Connection Group B Public Water Systems:**

- Skagit County Code: Chapter 12.48 (drinking water requirements)
  - Skagit County Code: Chapter 14.24 Sections 300-350 (aquifer recharge areas)
  - Washington Administrative Code: Chapter 246-291 (Group B Public Water Systems)
  - Washington Administrative Code: Chapter 173-160 (well construction standards)
- =====

**Water Well Report (sometimes called a “well log”) from a licensed well driller:**

This is a detailed report with written results of a bailer test, air lift test, or pump test, and well construction information. You may be able to find and print the Water Well Report from the Washington State Department of Ecology (425-649-7000) web site at: <http://apps.ecy.wa.gov/wellog/index.asp>. If you have difficulty finding the Water Well Report for your well please call our department at 336-9380 to learn about other resources to find it.

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**Well pump test results:**

The applicant must provide adequate documentation that the well can provide at least 700 gallons per day throughout the year. Usually at least a 4-hour pump and recovery test must be performed on the well to meet this requirement. During the test at least 700 gallons must be pumped from the water-bearing formation(i.e., not including the original amount of water in the well casing) and the entire pump test must be performed at 3.0 gallons per minute or greater. Depending on the location of the well and geology of the region, a complex pump test greater than 4 hours in length may be required. A pump test guidance document describing this requirement is included at the end of this packet (see “Addendum A”)

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**Well site protection requirements:**

The well site approval applies to lots created after January 1, 1992 and is a note stating there is a one-hundred foot “protection zone” around the well which is contained within the boundaries of the subject property. Most wells have been sited by the well driller. The following are acceptable forms of documentation:

- The licensed well driller may note on the water well report “meets Skagit County Code 12.48 siting criteria” **or**,
- The licensed well driller may write a letter stating “well meets Skagit County Code 12.48 siting criteria”.

A reserved well site area must be set aside for future use if either the water system must replace the existing well or if the water system owners wish to disband the shared well agreement and drill a second well so that each property owner has their own individual well.

The well needs to be located on the highest ground possible and up-slope from possible sources of contamination. The well site needs to be graded so that it is protected from normal drainage and flooding. All well sites must conform to the following siting criteria:

Well to septic tank.....	50 feet
Well to edge of drainfield and reserve drainfield areas .....	100 feet
Well to privies .....	100 feet
Well to public sewer line .....	100 feet
Well to sewage or manure lagoon .....	100 feet
Well to solid waste landfill property boundary .....	1000 feet
Well to underground storage tanks	
Well to building sewer collection and non-perforated distribution line.....	50 feet
Well to a road.....	100 feet

► **Greater setback distances may be required by the Health Officer based on specific well site issues.**

**Water quality:**

The water must be free of contaminants that are harmful to human health. The well water must be free of coliform bacteria and meet the Inorganic Chemical and Physical Characteristics requirements set in Skagit County Code Chapter 12.48. If any test result is above the Maximum Contaminant Level the treatment method and equipment must be approved by the Skagit County Public Health Department and a statement about the exceedances must be placed in the recorded Notice To Future Property Owners.

The water must be tested for coliform bacteria and also the following Inorganic Chemical and Physical Characteristics at a laboratory approved by the Washington State Department of Health:

<b>Inorganic Chemical or Physical Characteristic</b>	<b>Maximum Contaminant Level (in mg/L unless otherwise stated)</b>	<b>Health or Aesthetic Concern</b>
Arsenic	0.01	Skins and central nervous system damage.
Antimony	0.006	Gastrointestinal illness & potential human carcinogen.
Barium	2.0	Muscle stimulant, increase in blood pressure.
Chromium	0.1	Liver and kidney damage.
Fluoride	4.0	<ul style="list-style-type: none"> <li>• Reduces tooth decay (.7 ppm – 1.2 ppm ppm).</li> <li>• Tooth pitting and discoloration (2.0+ ppm ).</li> <li>• Bone damage (4.0+ ppm).</li> </ul>
Mercury	0.002	Central nervous system and kidney damage.
Nitrate	10.0	Reduces blood's ability to carry oxygen (infants particularly susceptible).
Selenium	0.05	Skin and gastrointestinal damage.
Chloride	250	Skin and gastrointestinal damage.
Conductivity	700 µmhos/cm	Indicator of contamination.
Iron	*	Gastrointestinal and objectionable taste, odor & staining.
Lead	*	Central and peripheral nervous system and kidney damage.
Hardness	*	Deposits in piping & may interfere with water treatment equipment.
Manganese	*	Taste, odor and staining; Central nervous system at high levels.

pH	*	<ul style="list-style-type: none"> <li>• Low pH: bitter metallic taste: pipe corrosion.</li> <li>• High pH: slippery feel; soda taste; deposits.</li> </ul>
Sodium	*	<ul style="list-style-type: none"> <li>• Increased blood pressure.</li> <li>• May indicate seawater intrusion.</li> </ul>
Total dissolved solids	*	Hardness: deposits; colored water; staining; salty taste.
Turbidity	*	Cloudy water; interferes with treatment or disinfection.

\*no MCL

- Test results that are above the maximum contaminant level must be re-tested to confirm contamination.
- Inorganic testing will be acceptable for five years
- Such other parameters that the Health Officer deems significant based upon local trends of water quality

# Addendum A

## Well Pump and Recovery Test

The purpose of the well pump and recovery test is to determine if the well has the capacity to provide at least 700 gallons per day, each and every day of the year. Establishing well and/or pump capacity is critical to the formation of a small water system. A good well/pump test provides information regarding the capacity and reliability of your well, and also defines the area of influence of your well. Air tests and bailer tests are not an approved method for testing well capacity; however they can provide information that can be used to estimate a pumping rate for the pump test.

The pump test must meet the following minimum requirements:

- Pumping test duration: 4 hours minimum *after stabilization has occurred*.
- Volume: The pump test must continue until at least 700 gallons of water have been pumped from the water-bearing formation (this is the minimum daily production for a two-connection residential Group B public water system)
- Recovery test duration: Measure the water level must until it recovers to at least 95% of the original static level (also within the maximum 24 hour period of the entire test). This portion of the test provides information crucial to determining the potential sustainability of the water source.
- Entire test duration: the pump and recovery test should not exceed a total of 24 hours

Special equipment is required to perform the pump test to ensure reliable and accurate results. The information will be used to determine the proper pump size, and to determine the ability of the water system to provide an adequate amount of water during peak demand, and whether equalizing storage is recommended. The minimum test-pumping rate is 3.0 gallons per minute; however it should be as high as the well will yield to determine the capacity of the well. If the well cannot supply at least 3.0 gallons per minute during the water level stabilization period of the pump test it may not be acceptable to the Skagit County Public Health Department to be shared by two residences (professional justification supplied by the applicant may be needed).

**In higher risk areas such as areas with potential seawater intrusion or low-yield bedrock aquifer areas, a 24-hour pump test may be required to ensure that the well is capable of supplying an adequate quantity and quality of water. It is highly recommended that the applicant contact the Skagit County Public Health Department prior to conducting the pump test should be contacted to make sure that the appropriate test is conducted. Failure to do so may result in the applicant being required to conduct a repeat test.**

## **Pump Test Procedure:**

Normally the pump test needs to run until drawdown stabilization (little or no fluctuation in water level) has been established for at least 4 hours. In no case should the total test time be conducted for less than four hours plus the amount of time it takes to reach stabilization and allow for 95% recovery of the water level after the pump test. At a minimum, pump test measurements should be made at the following time intervals:

Time since pumping started (or stopped) in minutes	Time intervals between measurements in minutes
0-15	1
15-60	5
60-termination of test	30

Once the pump test is terminated, measurements on recovery should be made on the same schedule as was done for the pumping portion of the test. When the last measurement has been taken and the pump has been turned off, monitor the time for the recovery of the static water level. **Recovery must be monitored until at least 95% of the original static level has occurred.**

The most effective way to determine the pumping rate is by utilizing a pump with a metered discharge. If a meter is not used, measure the pumping rate by catching water from the pump discharge in containers of known capacity (an open 55 gallon drum or several 5 gallon buckets work great) and monitor the time it takes to fill the containers. The volume or flow rate (in gpm) is the total gallons filled divided by the time (in minutes) it took to fill that many gallons. Pumping rates can change as drawdown occurs. It is important to measure the pumping rate throughout the course of the test (every 30 minutes to an hour).

There are several ways to measure the water level and drawdown in a well. In all cases, there must be access for a measuring line into the well in the space between the well casing and the pump column.

### **Measurements**

*Static water level:* The depth below the ground surface to the normal water level when no water is being taken from the well either by pumping or by free artesian flow. To make a water level measurement is truly static and is not being influenced by previous pumping, multiple water level measurements should be taken over a span of 30+ minutes. If the water level remains constant, this level is likely the static level. If not, the well needs a longer amount of time to equilibrate.

*Pumping Level:* Level at which the water stands in the well when pumping is in progress.

*Drawdown:* The amount of lowering the water level undergoes when pumping is in progress or when water is discharged from a flowing well. Drawdown is the difference between the static water level and the pumping level.

*Recovery Rate:* The amount of time that it takes (in minutes) for the water level in the well to return to the previously measured static water level after the pump is turned off.

The measurements described above must be recorded and submitted with the application. The Skagit County Public Health Department has blank pump test and recovery forms that can be filled in (available upon request).

► *If the applicant has not yet had the Inorganic Chemicals and Physical Characteristics test done yet, the test sample of water should be obtained during the last few minutes of the pump test.*

**Pumphouse design/construction diagram:**

The pumphouse design document must be neat and appropriately scaled (by hand is sufficient if it is neat and the words legible). The diagram on one page and include the following items:

- Pressure tanks
- Source meter\*\*\* (either one meter for the whole system or individual meters for each connection)
- Storage tanks that are not pressurized (if any)
- Water treatment equipment (include the equipment name, specifications and the purpose of the equipment)
- Pressure Relief Valve\*\*\* (for each pressure tank)
- Pressure Switch
- Pumps
- Piping
- Walls and doorway of the pumphouse (if it is part of a garage or parts are in multiple places then make this clear, perhaps two pages if necessary)

\*\*\*Although the design of the water system is not reviewed and approved by the Skagit County Public Health Department, the source meter and the Pressure Relief Valve(s) are required parts of the water system and will be looked for during the department’s final site inspection of the water system



**Scaled site plan:**

A detailed site plan of both properties must be included with the application. The plan must show at least the two properties that will have water service connections, but must include any property where parts of the water system or 100-foot well site and reserved well site protection zones are located. The plan must include:

- Property lines
- Well site with 100-foot well protection zone shown
- Reserved well site with 100-foot well protection zone shown
- Water lines with a descriptive note for the length and diameter shown
- Buildings (all existing and proposed)
- Public roads, private roads, and driveways
- All septic system components (including reserved drainfield areas)
- Chemical/fuel storage tanks
- A north/south indicator symbol
- Indication of land slope direction
- Surface water bodies (rivers, creeks, sloughs, lakes, saltwater, ponds, etc.)
- Wetlands, wetland buffers, and other critical areas
- Any potential source of contamination



## Addendum B

### **Notice to Future Property Owners:**

A notice must be recorded with the Skagit County Auditor that includes an agreement about how the water system will be managed, what the easements are for access to the system components, well site and reserved well site protection covenant(s), the site plan, and the notice that it is a public system that must be maintained according to local and state regulations. An example notice is included with this packet (see "Addendum B") and may be used by the applicant to create their own notice. A digital copy is also available from our department in Microsoft Word format.

***The notice shown here is a DRAFT: the applicant creates their own notice: the following notice may be copied but would need to the proper information filled in and meet the Auditor's document recording standards (the standards are provided after this draft notice)***

Do not record your notice until it has been reviewed and approved by Skagit County Public Health and Community Services. If you record an inadequate notice you will have to record a corrected document (increases your costs and time to approve).

### NOTICE TO FUTURE PROPERTY OWNERS

Parcel 1-	Site address 1-
Parcel 2-	Site address 2-

### PUBLIC SYSTEM

This property is served by a public water system, ( **write in name of..** ) public system, with the ID# ( **write in ID# provided by the Washington State Dept of Health**), which is subject to the requirements in Chapter 246-291 Washington Administrative Code and Chapter 12.48 Skagit County Code. The system purveyor is responsible for maintaining this system in compliance with these regulations. Chapter 246-291-030 (3) WAC allows the Skagit County Public Health Department, at its discretion, to reduce the design requirements for two connection residential public water systems. Skagit County has approved this system based on water quality and quantity data provided by the owner, but did not review or approve the design or construction of this system.

### WATER SYSTEM PURVEYOR REQUIREMENTS

The purveyor of the water system is the person listed as the "primary contact" person on the Water Facilities Inventory Form (provided by the Washington State Department of Health). The purveyor is responsible for ensuring submission of all necessary water samples as required in the Chapter 246-291 WAC and properly addressing emergencies such as system shutdown, repair, and bacteria contamination. The purveyor is required to provide his/her name, address and telephone number to the Skagit County Public Health Department. The purveyor is required to organize and maintain the water system records. The purveyor must make all water system records available for review and inspection. Prior to purchasing one of these two properties, it is recommended that the proposed purchaser contact the Skagit County Public Health Department to determine whether this system is in compliance with applicable regulations.

### **EXEMPT WELL AND FLOW-SENSITIVE BASIN REQUIREMENTS**

The Department of Ecology has not issued a Water Right Permit for this well. The purveyor is required to adhere to the requirements in RCW 90.44.050 and is not allowed to pump more than 5,000 gallons per day from this well and can not use water from this well to irrigate more than 1/2 acre of land in total without a Water Right Permit issued by the Department of Ecology. All public water systems expanding after April 14, 2001, for areas subject to Chapter 173-503 WAC or after September 26, 2005, for areas subject to Chapter 173-505 WAC shall install and maintain water source meters. If the well is located in a flow-sensitive basin established in Washington Administrative Code 173-503-074 and 173-505-090 the water system purveyor (manager) shall provide an annual report of monthly water use data to the Skagit County Public Health Department Health Officer.

### **WATER SYSTEM OWNERSHIP AND EQUAL FINANCIAL BURDEN**

It is agreed by the parties that each of said parties shall be and is hereby granted an undivided one-half interest in and to the use of the well and water system to be constructed. Each party shall be entitled to receive a supply of water for one residential dwelling and shall be furnished a reasonable supply of potable and healthful water for domestic purposes.

### **COST OF MAINTENANCE OF WATER SYSTEM**

Each party hereto covenants and agrees that they shall equally share the maintenance and operational costs of the well and water system herein described. The expense of water quality sampling as required by Skagit County shall be shared equally by both parties. The parties shall establish and maintain a reserve account at a mutually agreed upon banking institution. Each party shall be entitled to receive an annual statement from said banking institution regarding the status of the reserve account. The monetary funds in the reserve account shall be utilized for the sole purpose of submitting water samples for quality analysis and maintaining, repairing or replacing the well and common waterworks equipment or appurtenance thereto.

### **EASEMENT OF WELL SITE AND PUMPHOUSE**

There shall be an easement for the purpose of maintaining or repairing the well and appurtenances thereto, within 30 feet of the well site in any direction. Said easement shall allow the installation of well house, pumps, water storage reservoirs, pressure tanks, and anything necessary to the operation of the water system.

### **WATER LINE EASEMENTS**

Attachment A shows the locations of water lines, the pumphouse and other held-in-common components of the water system. Building permanent structures on the water line easements is prohibited except as needed for the operation of the well and water system.

### **MAINTENANCE AND REPAIR OF PIPELINES**

All pipelines in the water system shall be maintained so that there will be no leakage or seepage, or other defects which may cause contamination of the water, or injury, or damage to persons or property. Cost of repairing or maintaining common distribution pipelines shall be borne equally by both parties. Each party in this agreement shall be responsible for the maintenance, repair, and replacement of pipe supplying water from the common water distribution piping to their own particular dwelling and property.

### **WELL SANITARY CONTROL AREA**

The parties herein, their heirs, successors and/or assigns, will not construct, maintain or suffer to be constructed or maintained upon the said land and within 100 feet of the well herein described, so long as the same is operated to furnish water for two or more connections, anything that may contaminate the well. Perpetual adherence to the minimum well location and sanitary control area requirements stated in WAC 173-160 for individual water systems is required.

### **PROVISIONS FOR CONTINUATION OF WATER SERVICE**

The parties agree to maintain a continuous flow of water from the well and water system, herein described in accordance with public water supply requirements of the State of Washington and Skagit County. In the event that the quality or quantity of water from the well becomes unsatisfactory as determined by the Skagit County Public Health Department, the parties shall develop a new source of water. Prior to development of, or connection to a new source of water, the parties shall obtain written approval from the Skagit County Public Health Department. This system is not required to have back-up facilities to cover power outages or other system failures. Contact the system purveyor for information regarding the reliability of this system.

### **RESTRICTION ON FURNISHING WATER TO ADDITIONAL PARTIES**

It is further agreed by the parties hereto that they shall not furnish water from the well and water system herein above described to any other persons, properties or dwellings other than one residence on each of the two properties without prior consent of both property owners and written approval from Skagit County Public Health Department.

### **RENTERS**

If either residence is rented the property owner will provide a copy of this notice to the renter.

### **HEIRS, SUCCESSORS AND ASSIGNS**

These covenants and agreements shall run with the land and shall be binding on all parties having or acquiring any right, title, or interest in this land described herein or any part hereof, and it shall pass to and be for the benefit of each owner thereof.

### **ENFORCEMENT OF AGREEMENT ON NON-CONFORMING PARTIES AND PROPERTIES**

The parties herein agree to establish the right to make reasonable regulations for the operation of the system, such as the termination of service if bills are not paid.

### **SYSTEM DISSOLUTION**

If a dispute arises between the users which cannot be resolved, they may dissolve this water user's agreement and develop a second water system so that each of the two properties is served by their own individual water systems. In this case, the second well may be drilled in the designated. If the public system is dissolved, the property owners are required to promptly notify the Skagit County Public Health Department of the dissolution.

WITNESS \_\_\_\_\_ hand \_\_\_\_\_ this \_\_\_\_\_ day of

\_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_ Grantor

\_\_\_\_\_ Grantor

State of Washington

County of Skagit

I, the undersigned, a Notary Public in and for the above named County and State, do hereby certified that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared before me \_\_\_\_\_ to me known to be the individual described in and who executed the within instrument, and acknowledged that s/he (they) signed and sealed the same as \_\_\_\_\_ free and voluntary act and deed, for the use and purposes therein mentioned.

GIVEN under my hand and official seal the day and year last above written.

\_\_\_\_\_

Notary Public in and for the State of Washington, residing at \_\_\_\_\_

(SEAL or STAMP)

## **Auditor's document recording standards provided by Judy Zavala on October 28, 2013**

**FORMAT.** The first page of the document must have a three-inch margin at the top and a one-inch margin on the sides and bottom. Each additional page of the same document must have one-inch margins on all sides.

The document's first page must include the following key information:

- Return address on left side (may be within the three-inch top margin)
- Document title or titles
- Reference numbers of document assigned or released (if applicable)
- Names of the grantors and grantees with reference to pages where additional names can be found
- Entire or abbreviated legal description
- Assessor's property tax parcel number or account number

It is our preference that this information be included in the order listed above.

All documents will not contain all the above information. Please read the descriptions of each item found later in this guide to see if that particular item applies to the document you are preparing. Although the requirement is only that the above noted information appear somewhere on the first page, we especially appreciate having it immediately following the three-inch top margin.

**COVERSHEET.** A coversheet is only required if the first page of the document does not include the required information [listed above](#) and a three-inch top margin. When a coversheet is used to fulfill the [three-inch top margin](#) and indexing information requirements, all other requirements must still be met or the document will be returned for compliance. When a coversheet is used, a one dollar charge will be added to the recording fee for the additional page on the document.

It is our preference that documents be reformatted to meet the requirements, thereby eliminating the need for an extra page. Coversheets will be provided in the Auditor's office. Although the coversheet must be completed by the customer, our staff will assist customers in identifying indexing type information (for example, explaining to a customer which name is the grantor and which the grantee). It is not acceptable to put "See attached" or "See page..." in place of including information on the form.

**MARGINS.** As noted above in "[Format](#)", the first page of the document must have a three-inch margin at the top and a one-inch margin on the sides and bottom. Each additional page of the same document must have one-inch margins on all sides. Aside from the [return address](#) in the top three-inch margin of the first page, all margins must be clear. No additional addresses, bar codes, company logos, hole punches, line numbers, order numbers, page numbers, tracking numbers, headers, footers, notary or other seals, signatures, initials, etc., may be placed in any margin. You may place this information on the document, but keep it out of the required margins.

There is no penalty fee included in this legislation for documents that do not comply with margin requirements. Documents that do not comply will be returned for reformatting.

**ATTACHMENTS.** No attachments may be affixed to documents presented for recording. For purposes of this standard, "attachments" refers to notary seals, sticky notes, or other items stapled, taped, etc., to the face of a document. "Attachment" does not refer to additional pages added to the end of a document, such as addenda, schedules, or an expanded [legal description](#) that may be referenced in the body of the document as "Attachment A" or "Appendix A," etc.

**FONTS.** The font size must be 8 point type or larger. Smaller than that is very difficult to read and does not image or reproduce easily.

**PAGE SIZE.** The maximum page size is 8.5" by 14". If your document is oversized you will need to reduce the original to fit on 8.5" by 14" or use multiple 8.5" by 14" pages. Some counties may accept maps on an 18" by 24" mylar. Please call the county in which you intend to record.

**LEGIBILITY.** The paper must be of a weight and color capable of producing legible images. Watermarks in the body of documents produce unreadable images and are being returned for reformatting. Highlighting also causes problems: when documents have been highlighted in certain colors, the highlighted words are obliterated when scanned, copied, or filmed.

**TITLE.** If using a [coversheet](#), the title(s) on the coversheet must be the same as the title(s) on the document.

**RETURN ADDRESS.** The return address should be placed within the [three-inch top margin](#).

**REFERENCE NUMBER.** The Auditor's File Number is the reference number of the document being assigned or released. Volume number and page number may also be used, especially on documents recorded in the past.

**GRANTOR.** To find the appropriate party or parties to place in this field, please contact the Skagit County Auditor's Office, Recording Division, for the list titled "Summary of Recorded Documents".