

Return to: 6266 Geleynse c/o Skagit Cty Planning & Permit Ctr
200 N. Washington St
Art. Vernon, WA 98273 - 3877

336-9410



200409240065
Skagit County Auditor

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OPERATION & MAINTENANCE AGREEMENT

This agreement is entered into between _____ hereinafter referred to as Operator, and Bruce & Lenna Knudsen DBA Sparrow Developing Inc. hereinafter referred to as Owners, on this _____ day of _____, 20____ and will be recorded against the property which the Whitewater unit is installed.

Property Address: 493-B Carolina St Leald Situs 7
Anacortes WA 98221

Tax Parcel ID#: P107814

Legal Description: Gibraltar Block 24 Lot 17 to 20, acres .47
together with vacated streets and alleys adjacent
except AF# 9506120079

hereafter "the Property".

The dwelling unit(s) on the Property utilize(s) an alternative method of sewage treatment, a Whitewater mechanical aerobic treatment system. The Whitewater unit is required to be monitored and maintained in accordance with regulations as stated in WAC 248-96-046 and the SKAGIT County Board of Health Resolution Number 17443 Section 12, subsection .02. Removal, replacement or alteration to this system must be in compliance with all applicable current SKAGIT County Health District and Department of Health regulations governing on-site sewage.

The owner(s) of the Property are responsible for all costs associated with monitoring and maintaining the Whitewater unit. The agency responsible for maintaining and monitoring the Whitewater unit in SKAGIT County is:

Agency/Distributor: _____
Address: _____

Phone Number: _____

The purpose of this agreement is to outline the responsibilities of OWNER and OPERATOR regarding the monitoring and maintenance of a Whitewater mechanical aerobic treatment system. AN OPERATION AND MAINTENANCE MANUAL HAS BEEN PRESENTED TO THE OWNER. The owner acknowledges receipt and understanding of the text of that agreement.

Initials AK

When the Property is sold, the new OWNER(S) must be advised and assume the OWNER'S responsibility under this agreement. This agreement will become effective immediately after installation and continue for 2 years at a rate of \$ _____ per year, payable in advance annually by OWNER. The agreement year will commence on the first of the month following the month of installation. This agreement will automatically renew every two years, unless replaced by another Maintenance Agreement approved by the Local Health Department and the State Health Department, from an OPERATOR certified to operate the Whitewater unit. If this agreement is canceled, the operator will notify the Local Health Department within 10 days of said cancellation.

All notices required under this Agreement are to be in writing, and transmitted by U.S. Mail, express courier service, fax or hand-delivery. Written notices shall be deemed to be given upon dispatch.

Notices and other communications to the Health Dept. shall be transmitted to:

GREG GELEY/SE / Skagit Cty Planning & Permit Ctr
200 W. Washington St
Mt. Vernon WA 98273-3877
 Phone number: _____

Notices and other communications to the OWNER shall be transmitted to:

Bruce & Lenna Knowlton DBA Sparrow Developing Inc
15203 Dewey Crest Lane
Anacortes WA 98221
 Phone number: 360-293-2377

Notices and other communications to the OPERATOR shall be transmitted to:

 Phone number: _____

Jenna Knowlton 9/24/04



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STATE OF WASHINGTON

COUNTY OF Skagit

I certify that I know or have satisfactory evidence that Lenna Knowlton
is the person who appeared before me, and
said person acknowledged that she signed this
instrument and acknowledged it to be her free and voluntary act for the uses and
purposes mentioned in the instrument.

DATED: 9-24-04

[Signature]
Notary Public
My appointment expires 10-1-05



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