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PETER BROWNING, DIRECTOR HOWARD LEIBRAND, M.D., HEALTH OFFICER CORINNE STORY, ENVIRONMENTAL HEALTH SUPERVISOR PHONE: (360) 336-9380 FAX: (360) 336-9401

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) /AN WASHALL
AND ANTERES SIZE ACTOR CONTINUES
ADDRESS 13562 SOUTH GOODS STREET, ANACORTES
PARCEL # P69213
LEGAL DESCRIPTION
LOTS SEG, BIK I, SIMILK BEACH.
THIS ON-SITE SYSTEM IS SHARED UP 13570 S. GREEN
5TREET, P69212
THE FOLLOWING BEING

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

OF WASHING

(Owner signature)

__date__*3/20/08*

signed or attested before me on 03/30/08 by (Signature of Notary)

date 03/00/6My appointment expires 09-19-11