



201202060080
Skagit County Auditor

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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)

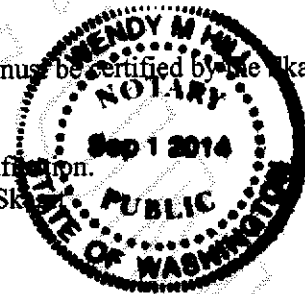
GRANTOR: (NAME OF OWNER) HASTINGS, RYAN D. & MIRANDA
GRANTEE: SKAGIT COUNTY
ADDRESS _____
PARCEL # P73602
LEGAL DESCRIPTION: PARCEL B OF SURVEY #AF200809040107
SEC. 17, TOWNSHIP. 34, RGE. 02, QTR. 03

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



Power of Attorney provided for Ryan David Hastings

(Owner signature) [Signature] date 1/12/2012

Signed or attested before me on 01-12-12 by (Signature of Notary) [Signature]

January 12 date 2012 My appointment expires Sep 1, 2014