



201801230022

Skagit County Auditor 974.00
1/23/2018 Page 1 of 1 11:10AM

JENNIFER JOHNSON, DIRECTOR
HOWARD LEIBRAND, M.D., HEALTH OFFICER

PHONE: (360) 416-1555 FAX: (360) 336-9416



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) JOSAFAT GUTIERREZ
GRANTEE: SKAGIT COUNTY
ADDRESS 18654 Best Rd. Mount Vernon WA 98273
PARCEL # P66235
LEGAL DESCRIPTION:

Lot 1 Kallstrom's View moor

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

(Owner signature) [Signature] date 01/23/2018

Signed or attested before me on 1/23/18 by (Signature of Notary)

Carrie d. Engels date 1/23/18 My appointment expires 8/11/21

