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Skagit County Auditor

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) John Huntley  
GRANTEE: SKAGIT COUNTY  
ADDRESS Tract 14 Sinclair Island  
PARCEL # P40391 + P69382  
LEGAL DESCRIPTION:

- 1.) PTN SW 1/4 MKA PTN TR 14 SURVEY OF SINCLAIRE 1 AF# 810618000Z
- 2.) SINCLAIR ISLE TRS DIV 1 LOT 1 AKA PTN TR 14 SURVEY OF SINCLAIRE AF# 810618000Z

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) John P. Huntley date Sept. 24, 2018

Signed or attested before me on 9.24.18 by (Signature of Notary)

[Signature] date 9.24.18 My appointment expires 03.15.21

