

Return To

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**Grantor(s):** (1) \_\_\_\_\_, (2) \_\_\_\_\_

**Grantee(s):** (1) PUBLIC

**Legal Description** (1) \_\_\_\_\_

*(Abbreviated form: i.e. lot, block, plat or section, township, range)*

**Assessor's Tax Parcel:** (1) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**DECLARATION OF COVENANT FOR ON-SITE SEWAGE ATTENUATION ZONE**

I (We) the grantor(s) herein, am (are) the owners in fee simple of (an interest in) the described real estate situated in Mason County, State of Washington; hereby declare this covenant & place the same on record;

to wit the described real estate on which the grantor(s) owns and operates an on-site sewage disposal system which has been granted a Class B State Waiver to reduce the Minimum Vertical Separation requirements and grantor(s) is (are) required to maintain a 50-foot horizontal attenuation zone down gradient of the on-site sewage system to facilitate treatment of the sewage effluent.

It is the purpose of these grants and covenants to prevent certain practices hereinafter enumerated in the use of the grantor(s) land which might encumber the land set aside for further sewage treatment and disposal.

NOW, THEREFORE, the grantor(s) agree(s) and covenant(s) that said grantor(s), his (her) (their) heirs, successors and assigns will not construct or install any trench, channel, ditch, road cut, utility chase, or other structure of excavation what would intercept or serve as a conduit for migrating ground water.

Dated on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature of Grantor(s):

(1) \_\_\_\_\_, (2) \_\_\_\_\_

State of Washington )  
County of Mason )

I, the undersigned, a Notary Public in and for the above named County and State, do hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, \_\_\_\_\_ personally appeared before me, who is known to be signer of the above instrument, and acknowledged that he (she) (they) signed it.  
GIVEN under my hand and official seal the day and year last above written.

\_\_\_\_\_  
Notary Public in and for the State of Washington,  
residing at \_\_\_\_\_  
My commission expires: \_\_\_\_\_