

Name & Return Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTICE: DRINKING WATER FOR THIS PROPERTY  
IS SUPPLIED FROM SURFACE WATER**

**GRANTOR(S):** \_\_\_\_\_

**GRANTEE:** The Public \_\_\_\_\_

**ABBREVIATED LEGAL DESCRIPTION:** \_\_\_\_\_

**TAX PARCEL NUMBER:** \_\_\_\_\_

I (we), the GRANTOR(S) herein, am (are) the owner(s) of the following described real property situated in Thurston County, Washington: (Legal Description): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

The drinking water serving this property is supplied from the following surface water source: \_\_\_\_\_

\_\_\_\_\_

A water treatment system designed by a licensed professional engineer must be installed that will provide continuous filtration and disinfection for the removal of bacteria. Ongoing maintenance of the water treatment system is required to meet minimum water quality standards for bacteria. The treatment system may protect against bacterial contamination, but may not protect against other contaminants, such as chemical contaminants that may be found in surface water.

DATED this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

GRANTOR(S): \_\_\_\_\_

STATE OF WASHINGTON            )  
  ) ss.  
COUNTY OF THURSTON         )

I certify that I know or have satisfactory evidence that \_\_\_\_\_ and \_\_\_\_\_ are the individuals who appeared before me, and acknowledged that he/she/they signed this instrument and acknowledged it to be their free and voluntary act for the uses and purposes therein mentioned.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Print Name  
Notary Public in and for Washington  
Residing at: \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_