

RECORDING REQUESTED BY AND WHEN
RECORDED MAIL TO:

CITY OF SAMMAMISH
C/O PERMIT CENTER
801 228TH AVE SE
SAMMAMISH, WA 98075

DECLARATION OF COVENANT PROHIBITING USE OF LEACHABLE METALS

Grantor(s): _____

Grantee: City of Sammamish

Legal Description: _____

Additional Legal(s) on: _____

Assessor's Tax Parcel ID#: _____

IN CONSIDERATION of the approved City of Sammamish _____ permit for Application No. _____, relating to real property legally described above, the undersigned as GRANTOR(S), declare(s) that the above described property is hereby established as having a prohibition on the use of leachable metals in the portions if the property exposed to the weather for the purpose of limiting metals in stormwater flows and is subject to the following restrictions.

The GRANTOR(S) hereby covenant(s) and agree(s) as follows: no leachable metal surfaces exposed to the weather will be allowed on the property. Leachable metal surfaces mean a surface area that consists of or is coated with a non-ferrous metal that is soluble in water. Common leachable metal surfaces include but are not limited to, galvanized steel roofing, gutters, flashing, downspouts, guardrails, light posts, and copper roofing. The CITY shall have a non-exclusive perpetual access easement on the PROPERTY in order to ingress and egress over the PROPERTY for the sole purpose of inspecting and monitoring that no leachable metal is present on the PROPERTY.

This easement/restriction is binding upon the GRANTOR(S), it's heirs, successors, and assigns unless or until a new drainage or site plan is reviewed and approved by the CITY's Public Works Department or it's successor.

IN WITNESS WHEREOF, this Declaration of Covenant is executed this _____ day of _____, 20____.

GRANTOR, owner of the Property

GRANTOR, owner of the Property

STATE OF WASHINGTON)
COUNTY OF KING)ss.

On this day personally appeared before me:

_____, to me known to be the individual(s) described in and who executed the within and foregoing instrument and acknowledged that they signed the same as their free and voluntary act and deed, for the uses and purposes therein stated.

Given under my hand and official seal this _____ day of _____, 20____.

Printed name
Notary Public in and for the State of Washington,
residing at

My appointment expires: _____