

Recording Requested By:)
)
 WEST BAY SANITARY DISTRICT)
)
 And When Recorded, Mail To:)
)
 West Bay Sanitary District)
 500 Laurel Street)
 Menlo Park, California 94025-3486)
 Attn: District Manager)

(Space above this line for Recorder's Use)

**NOTICE OF LIMITED SEWER SERVICE AGREEMENT WITH
 WEST BAY SANITARY DISTRICT**

The following agreement must be completed and signed by the property owner(s) and a \$25 recordation fee paid to the West Bay Sanitary District prior to Final Sewer Permit Inspection Pass.

A CLASS 1F Permit to be issued under Connection/Permit Record No.

Property Owner(s): _____

Property Address: _____

Assessor's Parcel Number: _____

The West Bay Sanitary District will accept, but NOT provide cleaning service to laterals rehabilitated with the following materials. Property Owners are specifically notified that the following methods are not as effective nor as long lived as the preferred methods.

- a) Cured-in-place materials
- b) HDPE SDR 17 installed pipe bursting

Acceptable Rehabilitation method of _____ installed pipe bursting has been chosen by the property owner(s). The owner(s) must sign this agreement which clearly states that although the District will allow the use of the pipe bursting and cured in place replacement methods, **THEY ARE NOT RECOMMENDED AND THAT:** 1) the side sewer will not receive cleaning service from the District, 2) the owner is to have this agreement notarized by a Notary Public, and 3) that this information will be disclosed by the property owner(s) should the property be transferred. This agreement shall be recorded at San Mateo County Recorder's Office by the District prior to acceptance of the sewer lateral.

 Signature (Owner)

 Date

 Printed Name (Owner)

 Signature (Owner)

 Date

 Printed Name (Owner)