

After Recording, Return to:
CITY OF FERNDALE
2095 MAIN ST
P.O. BOX 936
FERNDAL, WA 98248

PERMANENT ACCESSORY HOUSING AGREEMENT

Permit No. _____

Grantor (s):	
Grantee:	CITY OF FERNDAL, A MUNICIPAL CORPORATION OF THE STATE OF WASHINGTON
Abbreviated Legal Description:	
Assessor's Tax Parcel ID#:	

NOW, THEREFORE, I/We, _____ are owner(s) in fee of the above listed property, and agree to the restrictions described below, for and in consideration of being granted the right to improve said property, and other good and valuable consideration by the City of Ferndale Restrictions:

- A. The accessory unit shall not be converted to a condominium or sold separately.
- B. The unit is restricted to the approved size.
- C. The above declarations are binding upon successor in ownership of the property; lack of compliance shall be cause for code enforcement and/or revoking the occupancy or use permit.
- D. The deed restrictions shall lapse upon removal of the accessory unit.

I/We do hereby confirm that no portion of the above described properties shall be sold in violation of any provision of the aforesaid ordinance(s). This Declaration of Restrictions shall run with the land, is for the benefit of the general public, and shall be binding upon the heirs, devisee, executors, administrators, successors, and assigns. It may not be revoked without prior written consent of the City of Ferndale.

This agreement shall be binding upon Grantor's heirs, successors, and assigns.

City of Ferndale
Community Development Department
Community Development Director,
Michael Cerbone or designee

I certify that I know or have satisfactory evidence that _____
is/are the person(s) who appeared before me, and said person acknowledge that he/she signed this
instrument, on oath stated that he was authorized to execute the instrument and acknowledged it
to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

NOTARY PUBLIC, in and for the State of Washington,
Residing at: _____
Printed Name: _____
My Commission expires: _____

I certify that I know or have satisfactory evidence that _____ is/are the person(s) who appeared before me, and said person acknowledge that he/she signed this instrument, on oath stated that he was authorized to execute the instrument and acknowledged it to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

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