

MASTER COVENANT AND AGREEMENT

As part of the requirements of the Standard Urban Stormwater Mitigation Plan regarding on-site maintenance of Best Management Practices (BMPs), I (we) hereby request recording of this document with Los Angeles County Registrar-Recorder as follows:

Name _____

Address _____

Spaces Above This Line For Recorder's Use
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The undersigned certifies that he/she/they is(are) the owners of the hereinafter legally described real property located in the City of Inglewood, County of Los Angeles, state of California:

Legal Description _____

Site Address _____

And in consideration of the City of Inglewood permitting (description of work) _____

on said property, I (we) do hereby covenant and agree to maintain according to the attached Operations and Maintenance Plan to on-site stormwater pollutant removal device(s) including but not limited to: Filtration systems, Oil and Water Separators, Detention and Sedimentation Systems, and Water Quality Inlets. The specific structural/treatment BMPs are:

This covenant and agreement shall run with the land and shall be binding upon any future owners, encumbrancers, their successors, heirs or assigns and shall continue in effect until the Department of Public Works of the City of Inglewood approves its termination.

(Print Name of Property Owner)

(Print Name of Property Owner)

(Signature of Property Owner)

(Signature of Property Owner)

Dated this _____ day of _____, 20____.

Spaces Below This Line For Notary's Use
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ALL-PURPOSE ACKNOWLEDGEMENT

STATE OF CALIFORNIA, COUNTY OF LOS ANGELES

On _____ before me, _____ (name and title of officer), certify that the person(s), personally known to me (or proved to me on the basis of satisfactory evidence) to be the legal owners of the described real property, is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) executed the instrument.

WITNESS my hand and official seal.

Notary Public Signature (SEAL)

Spaces Below This Line For City of Inglewood – Department of Public Works
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Permit number _____ Attachment – Operations & Maintenance Schedule Y__N__ Site Plan Y__N__

Approved for recording by _____
(Signature) (Name) (Date)