CITY OF MERCER ISLAND

COMMUNITY PLANNING & DEVELOPMENT
9611 SE 36TH STREET | MERCER ISLAND, WA 98040
PHONE: 206.275.7605 | www.mercerisland.gov

INTAKE SCREENING REQUEST FORM

TO INITIATE AN INTAKE SCREENING

Step One: **Upload all Application Submittal Documents (including this form) to the Mercer Island File Transfer Site.**
Detailed instructions for the upload are available on the next page.

Step Two: **Upon Receipt of the Submittal Documents, City Staff will schedule the Screening and Request the Intake Screening deposit of $726.00, via email.** The deposit covers 5 hours of staff time, if additional time is required more fees will be requested. If less than 5 hours of staff time are used on your Screening, you will be issued a refund for the remaining deposit.

PROJECT INFORMATION

Name of Owner Gardner Morelli **Owner Address** 8454 W Mercer Way

Owner Email _____ **Owner Phone** _____

Project Address 8454 W Mercer Way **Parcel #** 362571-0050

Project Description Demo and rebuild of existing attached garage on existing foundation upper floor addition

Will you be expanding the building footprint by 500 square feet or more? YES ☐ _____ sq. ft NO ☒

Will there be a net increase of the impervious surface by 500 square feet or more? YES ☐ NO ☒

Will you be altering within a critical area or buffer? YES ☐ NO ☒

Will you be modifying more than 40% of the existing exterior wall? YES ☐ NO ☒

Are you applying concurrently for a Land Use action? YES ☐ NO ☒

If so what is your project #(s) and type(s)? _____

PROJECT CONTACT

Name Brad Sturman **Phone** 425-451-7003

Email brads@sturmanarchitects.com

Please note that there are no longer in person Intake screenings

SIGNATURE OF OWNER OR REPRESENTATIVE _____

FOR CITY USE ONLY

FEE PAID $ _____ **DATE PAID** _____ **PERMIT #** _____

WEEK OF SCHEDULED SCREENING _____