

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 Cecilia Yeung and Stewart Wang **Owner Address** 6127 92nd Ave SE, MI, WA 98040

Owner Email stewy001@gmail.com **Owner Phone** 206 457 3168

Project Address 6127 92nd Ave SE, MI, WA 98040 **Parcel #** 8651000040

Project Description Repair Fire Damage, add 650 sqft and remodel portions of the home

Will you be expanding the building footprint by 500 square feet or more? YES 650 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 Andy Herrick **Phone** 206 380 0732

Email alhpe_sliderule@q.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 _____