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 INIT	TIATE AN INTAKE S	CREENING					
Step O	iransier Si	Upload all Application Submittal Documents (including this form) to the Mercer Island File Transfer Site.					
Chan To	Detailed instructions for the upload are available on the next page.						
Step IV	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 a	re used on your Screenin	g, you will be issued a re	equested. If i	ess than 5 remaining (hours of deposit	
PROJEC	T INFORMATION				8		
Name o	of Owner JAYMA	INCEMERALD, LLC	Owner Address 7	5255E 24h	51=487		
Owner	Email gary	e taymarchoubs.	COM Owner Phone	MERCER,	Island, 21.270C	WA 98097	
Owner Email GORY & TAYMARCHOMES, COM Owner Phone MERCER, ISland, WA 9804 455-281-2106 Project Address 6575 SE 30 56. Parcel # 2174500800							
		ZMO/REBUILD					
Will you be expanding the building footprint by 500 square feet or more? YES ✓ ∠ /// sq. ft NO □							
Will there has a not increase of the increase in the increase of the increase					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	GARY UPPE	R	Phone 425	. 281.2	706		
Email	gary of	TO UMIRC LOME			1		
Please note that there are no longer in person Intake screenings							
SIGNATURE OF OWNER OR REPRESENTATIVE							
			, ,				
	Y USE ONLY						
FEE PAIC)\$	DATE PAID	P	ERMIT#	-		
WEEK O	F SCHEDULED SCR	EENING					