

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 DEB + TRAVIS LARSEN Owner Address 8557 85TH AVE SE

Owner Email projects@rippledesignstudio.com Owner Phone 206.913.2333

Project Address 8557 85TH AVE SE Parcel # 073610-0030

Project Description REMODEL TO EXISTING RESIDENCE

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 RIPPLE DESIGN STUDIO JIM DEARTH Phone 206.913.2333

Email projects@rippledesignstudio.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 _____