

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 Richard Day Owner Address 9843 Mercerwood Dr

Owner Email rday@columbiasoft.com Owner Phone 503-608-0490

Project Address 9843 Mercerwood Dr Parcel # 5456000490

Project Description Replace existing residence with new single family residence using portion of existing basement foundation.

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 Erik Voris Phone 206-329-4227

Email erik@conardromano.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 _____