

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 Permit Submittals Portal.

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 Fee of \$847 via email.

PROJECT INFORMATION

Name of Owner DAVID + KAREN ZIMMER **Owner Address** 4661 FOREST AVE SE

Owner Email davezimmer@comcast.net **Owner Phone** 360.731.0176

Project Address 4661 FOREST AVE SE **Parcel #** 404500-0065

Project Description DEMOLITION AND RE-BUILD NEW SINGLE FAMILY RESIDENCE

Will the building footprint expand by 500 square feet or more? YES _____ sq. ft NO

Will impervious surface increase by 500 square feet or more (net) on the project site? YES NO

Does your project alter a critical area or critical area buffer such as a wetland, watercourse, steep slope hazard, potential slide hazard, or seismic hazard? Check the Environmental Layers found on our [Online Map Portal](#) to see if your project is located near a mapped critical area. YES NO

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

Are you applying concurrently for a Land Use Approval? YES NO

If so what type(s) of Land Use Approval(s) and what is/are your project #(s)?

PROJECT CONTACT

Name JIM DEARTH - RIPPLE DESIGN STUDIO **Phone** 206.913.2333

Email projects@rippledesignstudio.com

There are no longer meetings associated with Intake Screenings – all comments will be delivered via email

SIGNATURE OF OWNER OR REPRESENTATIVE

FOR CITY USE ONLY

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

WEEK OF SCHEDULED SCREENING _____