

COMMUNITY PLANNING & DEVELOPMENT

9611 SE 36TH STREET | MERCER ISLAND, WA 98040

PHONE: 206.275.7605 | www.mercerisland.gov/cpd



AFFIDAVIT FOR EXEMPTION FROM SUBSTANTIAL DEVELOPMENT PERMIT WAC 173-27-040(2)(g)

I Walt Pisco Walt Pisco am the owner OWNER
(Owner or contract purchaser)

of the property located at 6000 SE 20TH ST, Mercer Island, WA 98040

I will personally reside in the residence on said property.

[Signature]
Signature

6000 SE 20TH ST, Mercer Island, WA 98040
Mailing Address

206-715-3535
Telephone Number

STATE OF WASHINGTON)

COUNTY OF) ss)

On this day personally appeared before me _____
to me known to be the individuals in and who executed the within and foregoing instrument, and
acknowledged that they signed the same as their free and voluntary act and deed, for the uses and purposes
therein mentioned.

** see attached document*

GIVEN under my hand and official seal this _____ day of _____, 20____.

NOTARY PUBLIC in and for the State of Washington

Residing at _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California }
County of Riverside

On February 24, 2026 before me, Jamie Reulman, notary
Date Here Insert Name and Title of the Officer

personally appeared Walt Pisco
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature [Handwritten Signature]
Signature of Notary Public

Place Notary Seal and/or Stamp Above

OPTIONAL

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____
Document Date: _____ Number of Pages: _____
Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____ Signer's Name: _____
 Corporate Officer – Title(s): _____ Corporate Officer – Title(s): _____
 Partner – Limited General Partner – Limited General
 Individual Attorney in Fact Individual Attorney in Fact
 Trustee Guardian of Conservator Trustee Guardian of Conservator
 Other: _____ Other: _____
Signer is Representing: _____ Signer is Representing: _____