

## RECEIVED NOV 20 2017 OFM FORECASTING

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## **State of Washington**

Office of Financial Management, Forecasting Division, General Administration Building, PO Box 43113, Olympia, WA 98504-3113

## ANNEXATION AND MUNICIPAL BOUNDARY CHANGE CERTIFICATE

For all Annexations and Boundary Line Adjustments – Including Street Right-of-Way Adjustments

**IMPORTANT:** The following documents must be attached with this certificate (RCW 35.13.260, 35A.14.700, 43.62.040):

1. Three copies of the final ordinance containing the legal description of the boundary change area;

Department of Transportation

Return to City/Town

(Canary)

(Pink)

- 2. Three copies of a map clearly showing the boundary change area and existing city limits on an 8½"x11" or 8½"x14" size paper. Outline the boundary changes in red; outline former city limits in green. Maps should conform to acceptable engineering standards (i.e., directional arrow, scale, street names, rivers, and other physical characteristics). The Office of Financial Management (OFM) may be able to help with maps;
- 3. **The original Field Enumeration** sheets used to enumerate the population and housing of the boundary change area and all summary tabulation sheets. Copies are not needed. Census procedures and definitions must follow OFM's Enumerator's Manual. Please contact OFM at (360) 902-0597 or (360) 902-0599 or see http://www.ofm.wa.gov/pop/annex/default.asp for census manuals and forms; and,
- 4. **If this is a mutual boundary change between governments,** include a copy of the other government's (city/town or county) agreement to the change. If this is a boundary change between municipal governments, **each** municipality needs to submit this certificate to OFM with supporting documentation.

City/Town Issaquah County Ki				King	
Name of the Annexation (if any) Bellevue Utility Island					
Original Ordinance Number		#2804	Amena	ling Ordinance Number (if applicable)	n/a
Date Passed		Sept 🕏, 2017	_	Date Passed	n/a
Date Published		Sept 15, 2017 ▶Sep	t. 22,2017	Date Published	n/a
Ordinance Effective Date		Oct 21, 2017	_	Ordinance Effective Date	n/a
Boundary Change Effective Date		Oct 21 2017	_	Boundary Change Effective Date	n/a
Authorizing Statute(s) RCW RCW 35A.14.295					
Was a Bounda	ary Review Board he	earing required? Yes	□ No 💢	If yes, date of hearing	n/a
Has this annexation been filed with the county? Yes $\fill X \fill X$ No $\fill X$			Date filed with county	Nov <b>9</b> , 2017	
Has the city/town attorney reviewed the legal requirements associated with this annexation?  Yes XXX No					
Annexation Area (in acres) 1.87 Census: Housing Units					
				Occupied Housing Unit	0
				Population	0
CERTIFICATION: I hereby certify that, to effect the above annexation, all legal requirements have been satisfied, and that the data set forth in this certificate, including the attached documents, are true and correct.					
Mayor Date 1/9/17					
[CITY SEAL] Attest: City/Town Clerk Might Branch Date 11917					
OFFICE OF FINANCIAL MANAGEMENT ONLY					
The requirements of RCW 35.13.260 or 35A.14.700 and 43.62.040 have been met. I recognize this annexation as a part of the city for the purpose of developing official population estimates (RCW 43.62.020). This certification is for the limited purpose referenced above.				Date Received       / 2	0/17 1/17 -57
State Certifying Official			Provisional Approval Yes Date Provisional Status Cleared		
(White) Office of Financial Management No Carbon Paper Neede					