



State of Washington

Office of Financial Management, Forecasting Division, General Administration Building, PO Box 43124, Olympia, WA 98504-3124

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):

- Three copies of the final ordinance containing the legal description of the boundary change area;
- 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 Solah	County	YAKIMA	
Name of the Annexation (if any) Graf			
Original Ordinance Number 2033	Amendir	ng Ordinance Number (if appl	icable)
Date Passed November 28,2	2017	Date Passed	
Date Published NO Vember 30, 20	<u>01</u> 7	Date Published	
Ordinance Effective Date December 5, 201	7	Ordinance Effective Date	
Boundary Change Effective Date December 5, 2017		Boundary Change Effective L	Date
Authorizing Statute(s) RCW 35A . 14.120			_
Was a Boundary Review Board hearing required? Yes	□ No 🗹	If yes, date of hearin	g
Has this annexation been filed with the county? Yes	₩ No □	Date filed with coun	ty 12-08-17
Has the city/town attorney reviewed the legal requirements associated with this annexation? Yes V No			
Annexation Area (in acres) 11.63		Census: Housing Units	
		Occupied Housin	ng Units
		Population	
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	Sherry	Roumand	Date (3-11-17)
[CITY SEAL] Attest: City/Town Clerk _	Bei	e Induly	Date 12-11-17
OFFICE OF FINANCIAL MANAGEMENT ONLY			
The requirements of RCW 35.13.260 or 35A.14.700 and 43.62.0		Date Received	12/15/17
met. I recognize this annexation as a part of the city for the pur developing official population estimates (RCW 43.62.020). This		Date Approved	12/22/17
is for the limited purpose referenced above.		OFM File Number	2017-66
State Certifying Official		Provisional Approval	Yes
	-	Date Provisional Status	Cleared