

State of Washington

Do not Separate Form

Return all Three Copies

Office of Financial Management, Forecasting Division, General Administration Building, PO Box 43113; Olympia:

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;

(Pink)

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Three copies of a map clearly showing the boundary change area and existing city limits on an 81/2"x11" or 81/2"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:

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,

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 Wenatchee County	Chelan
Name of the Annexation (if any) Rocklynd Island Anne	exation "
Original Ordinance Number 2016-29 Amend	ing Ordinance Number (if applicable)
Date Passed 10/27/16	Date Passed
Date Published 11/2/16 and 11/9/16	Date Published
Ordinance Effective Date 12/12/16	Ordinance Effective Date
Boundary Change Effective Date 12/12/16	Boundary Change Effective Date
Authorizing Statute(s) RCW 35A.14, 295-299	
Was a Boundary Review Board hearing required? Yes 🗌 No 🔀	If yes, date of hearing
Has this annexation been filed with the county? Yes X No \(\subseteq \)	Date filed with county 12/12/16
Has the city/town attorney reviewed the legal requirements associated with this annexation? Yes No Annexation Area (in acres) 20.7 Census: Housing Units	
	Occupied Housing Units
	Population 162 165
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	
[CITY SEAL] Attest: City/Town Clerk	a Heman Date 1/10/17
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 1/13/2017 Date Approved 1/24/2017 OFM File Number 2017-007
State Certifying Official	Provisional Approval Yes Date Provisional Status Cleared
(White) Office of Financial Management (Canary) Department of Transportation	No Carbon Paper Needed Do not Separate Form