

JUL 24 2017

OFM FORECASTING

Do not Separate Form

Return all Three Copies

State of Washington

43124

Office of Financial Management, Forecasting Division, General Administration Building, PO Box 43113, Olympia, WA 98504-311

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;

Department of Transportation

Return to City/Town

(Canary) (Pink)

- 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;
- 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 Maple Valley County	Kina
Name of the Annexation (if any) Rainier Rida	e.
	ing Ordinance Number (if applicable)
Date Passed 3/6/17	Date Passed
Date Published 318117 3 10 17	Date Published
Ordinance Effective Date 3/13/17 3/15/17	Ordinance Effective Date
Boundary Change Effective Date 3 13 117.31517	Boundary Change Effective Date
Authorizing Statute(s) RCW	
Was a Boundary Review Board hearing required? Yes 🔲 No 💆	If yes, date of hearing
Has this annexation been filed with the county? Yes \square No \square	Date filed with county $3-15-2017$
Has the city/town attorney reviewed the legal requirements associated with this annexation? Yes 💢 No 🗌	
Annexation Area (in acres)	Census: Housing Units
	Occupied Housing 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.	
Sold in this conficult, including the undered documents, are true and correct.	
Mayor	Date 7 9 447
[CITY SEAL] Attest: City/Town Clerk	Date 7/10/2011
OFFICE OF FINANCIAL MANAGEMENT ONLY	
The requirements of RCW 35.13.260 or 35A.14.700 and 43.62.040 have been	Date Received 7/24/2617
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	Date Approved 7/27/2017
is for the limited purpose referenced above.	OFM File Number _ do17-35
State Certifying Official	Provisional Approval Yes 🗌
	Date Provisional Status Cleared
(White) Office of Financial Management	No Carbon Paper Needed