

**RETURN NAME and ADDRESS**

Pierce County Planning and Public Works  
Sustainable Resources Division  
9850 64<sup>th</sup> Street West  
University Place, WA 98467  
Attention: Kyla Wilson

Please Type or Print Neatly and Clearly All Information.

**Document Title(s)**

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**Reference Number(s) of Related Documents** \_\_\_\_\_

**Grantor(s)** \_\_\_\_\_

**Grantee(s)** Pierce County

**Legal Description** (Abbreviated form is acceptable, i.e., Section/Township/Range/Qtr Section or Lot/Block/Subdivision)

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**Assessor's Tax Parcel ID Number:** \_\_\_\_\_

The County Auditor will rely on the information provided on this form. The Staff will not read the document to verify the accuracy and completeness of the indexing information provided herein.

**Sign below only if your document is Non-Standard.**

I am requesting an emergency non-standard recording for an additional fee as provided in RCW 36.18.010. I understand that the recording processing requirements may cover up or otherwise obscure some parts of the text of the original document. Fee for non-standard processing is \$50.

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Signature of Requesting Party