Legislative Review Form



county agencies, or stakeholders

		C1- 1		
Agency: NNW	Contact person Hrsche		Phone 477 - 5387	
Ordinance Motion Pr		oort [Other	
Civil Division Prosecuting Attorney			Other [Snogualmie Watu
Name Joe Rochalle	Version 6			
Dept. Director or Designee Review	version ()	nal	Date	RECEIVED 2013 DOT 23 PM 3: 5 EIN'S COUNTY COUNC
Name 1800 Burns	^			S C C C C C C C C C C C C C C C C C C C
	Version 6	rel	Date	EN 23 I
Performance Strategy & Budget Office Review				ECEIVED OT 23 PM 3: 55
Name John Walsh	Version for	al	Date	HOIL
Technical Form/Code Reviser Review - Confirm adherence to legislative format				
Name	Version		Date	110
Executive Office Review & Transmittal Approval			Date	100
Name Jor Woods	Version 60	al	Dete	
			Date	
ENTRANCE CRITERIA REVIEW				
Fiscal note?		Y 🗹	NA \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	s) KCC CLERK
KC Strategic Plan reference in letter?		YV	NA TY	Y NA
Proof read for spelling and grammar?			NA 🗆 Y	Y NA T
All pertinent attachments listed/labeled	1?	Y	NA 🗌	Y NA NA
Costs identified/described in letter		Y	NA V Y	Y NA NA
Regulatory Note Required and Complete? Formatted/Delivered in word-searchable doc format? Y			NA VY	Y NA
Potential Anneyation Area (DAA) immediate			NA X	Y NA NA
Advertising required? if yes, cite all pertinent code/laws				
Any special circumstances affecting pro	ocessing time?	Y	NA V	Y NA NO Y NA O
Other background information not included in transmittal letter, including explanation of impact to cities,				
county agencies, or stakeholders				