

RBD  
TRES  
Parker



## King County

### Legislative Review Form

appting  
Leah Grand

2014-436

Agency: DES/OCROG

Contact person Rick Ybarra

Phone: 206-263-9651

Ordinance ☐ Motion ☒ Proviso ☐ Report ☐ Other ☐

#### Civil Division Prosecuting Attorney Review

Name John Gerberding, PAO

Version **Final**

Date 10/7/2014 @ 5:15pm

#### Dept. Director or Designee Review

Name Kelli Williams, Director, OCROG Version **Final**

Date

#### Performance Strategy & Budget Office Review

Name

Version

Date

#### Technical Form/Code Reviser Review – Confirm adherence to legislative format

Name Bruce Ritzen, Council Staff

Version **Final**

Date 9/23/2014 @ 3:14pm

#### Executive Office Review & Transmittal Approval

Name Joe Woods, Deputy Chief of Staff Version **Final**

Date 9/19/2014 @ 10:00 am

RECEIVED  
2014 OCT 14 PM 3:43  
KING COUNTY COUNCIL  
CLERK

### ENTRANCE CRITERIA REVIEW

#### EXEC OFFICE (initials) KCC CLERK

Fiscal note?	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/>
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/> NA <input type="checkbox"/>	Y <input type="checkbox"/> NA <input type="checkbox"/>
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/> NA <input type="checkbox"/>	Y <input type="checkbox"/> NA <input type="checkbox"/>
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/> NA <input type="checkbox"/>	Y <input type="checkbox"/> NA <input type="checkbox"/>
Costs identified/described in letter	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/> NA <input type="checkbox"/>
Regulatory Note Required and Complete?	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/> NA <input type="checkbox"/>
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/> NA <input type="checkbox"/>	Y <input type="checkbox"/> NA <input type="checkbox"/>
Potential Annexation Area (PAA) impacts identified?	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/> NA <input type="checkbox"/>
Advertising required? if yes, cite all pertinent code/laws.	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/> NA <input type="checkbox"/>
Any special circumstances affecting processing time?	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/> NA <input type="checkbox"/>

Other background information not included in transmittal letter, including explanation of impact to cities, county agencies, or stakeholders