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## King County

# Legislative Review Form

2014-454

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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 10/27/2014 @ 4:48pm

### Dept. Director or Designee Review

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

Date

### Performance Strategy & Budget Office Review

Name NIA Version Date

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

Name Bruce Ritzen, Council Staff Version **Final** Date 10/27/2014 @ 2:49pm

### Executive Office Review & Transmittal Approval

Name Joe Woods, Deputy Chief of Staff Version **Final** Date 10/23/2014 @ 4:00pm

## 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 type="checkbox"/> No
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"/> No
Regulatory Note Required and Complete?	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/> NA <input type="checkbox"/> No
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"/> No
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"/> No
Any special circumstances affecting processing time?	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/> NA <input type="checkbox"/> No

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