



King County

Legislative Review Form

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2016-069
CYAB

Agency: DCHS Contact person Adrienne Quinn Phone 3-9100

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name Mike Sinsky Version final Date 1-14

Dept. Director or Designee Review

Name Adrienne Quinn Version final Date

Performance Strategy & Budget Office Review

Name N/A Version Date

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

Name Bruce Ritzen Version final Date

Executive Office Review & Transmittal Approval

Name Michelle Allison Version final Date 1-14

RECEIVED
2016 JAN 15 AM 9:33
KING COUNTY COUNCIL
CLERK

ENTRANCE CRITERIA REVIEW

	<u>EXEC OFFICE (initials)</u>		<u>KCC CLERK</u>	
Fiscal note?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input checked="" type="checkbox"/>	Y <input type="checkbox"/> NA <input type="checkbox"/>
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input checked="" 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 checked="" 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 checked="" 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 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 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 checked="" 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 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 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 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