

KL
Carroll
Wagner

Legislative Review Form

app'ing
Thomas
Hillier



King County

Agency: DES/OCROG Contact person Rick Ybarra Phone: 206-263-9651

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name Mike Sinsky, PAO Version **Final** Date 6/13/2014 @ 1:26PM

Dept. Director or Designee Review

Name Kelli Williams, Director, OCROG Version **Final** Date 6/16/2014 3:43 PM

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 6/13/2014 @ 9:53am

Executive Office Review & Transmittal Approval

Name Joe Woods, Deputy Chief of Staff Version **Final** Date 6/10/2014 @ 10am

RECEIVED
2014 JUN 17 PM 1:25
CLERK
KING COUNTY COURTL

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

Fiscal note?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<i>no</i>
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input checked="" 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"/>	NA <input type="checkbox"/>	
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input checked="" 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"/>	<i>no</i>
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<i>no</i>
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input checked="" 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"/>	<i>no</i>
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"/>	<i>no</i>
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<i>no</i>

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