

*MED*  
*P22*  
*Resub*

2015-015

# Legislative Review Form

*receiving*  
*John Browne*



## King County

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 11/24/2014 @ 4:41pm

### 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 11/21/2014 @ 2:32pm ✓

### Executive Office Review & Transmittal Approval

Name Joe Woods, Deputy Chief of Staff Version **Final** Date 11/19/2014 @ 11:00 am

RECEIVED  
2014 DEC 18 PM 3:40  
CLERK  
KING COUNTY COUNCIL

## ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

Fiscal note?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	f	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	g	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	e	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	e	Y <input type="checkbox"/>	NA <input type="checkbox"/>	
Costs identified/described in letter	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	e	Y <input type="checkbox"/>	NA <input type="checkbox"/>	
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	e	Y <input type="checkbox"/>	NA <input type="checkbox"/>	
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	e	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Potential Annexation Area (PAA) impacts identified?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	e	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"/>	e	Y <input type="checkbox"/>	NA <input type="checkbox"/>	No
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	e	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