

Legislative Review Form



**King County**

*READ  
REV Steve  
Baber*

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

Ordinance  Motion  Proviso  Report  Other

Civil Division Prosecuting Attorney Review

Name ~~John Gerberding, P.A.~~ Version ~~Final~~ *Told to skip* Date

Dept. Director or Designee Review

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

Performance Strategy & Budget Office Review

Name *NI/A* Version Date

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

Name ~~Bruce Bl...~~ Council Staff Version ~~Final~~ *told to skip* Date

Executive Office Review & Transmittal Approval

Name Joe Woods, Deputy Chief of Staff Version **Final** Date 7/23/2014

RECEIVED  
 2014 JUL 24 AM 9:25  
 KING COUNTY COUNCIL CLERK

*Told not to review to Baber*

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 type="checkbox"/>	NA <input 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