

AFM  
CB  
AK



# King County

## Legislative Review Form

# 2019-171

Total Comp - 2nd

Transmittal  
Supplemental

Agency: Office of Performance, Strategy and Budget Contact person Helene Ellickson  
Phone 263-9691

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name Peggy Pahl Version Final Date 4/16/2019

### Dept. Director or Designee Review

Name Dwight Dively Version Final Date 4/22/2019

### Performance Strategy & Budget Office Review

Name Helene Ellickson Version Final Date 4/19/2019

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

Name Bruce Ritzen Version Final Date 4/4/2019

### Executive Office Review & Transmittal Approval

Name Shannon Braddock Version Final Date 4/23/19

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2019 APR 23 PM 4:11  
CLERK  
KING COUNTY COUNCIL

### ENTRANCE CRITERIA REVIEW

	EXEC OFFICE (initials)			KCC CLERK		
Fiscal note?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
All pertinent attachments listed/labeled?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	
Costs identified/described in letter	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	Y <input type="checkbox"/>	NA <input type="checkbox"/>	no
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	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"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Potential Annexation Area (PAA) impacts identified?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	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"/>	epn	Y <input type="checkbox"/>	NA <input type="checkbox"/>	no
Any special circumstances affecting processing time?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	

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