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# Legislative Review Form



## King County

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# 2020-089

CLERK  
KING COUNTY COUNCIL

Agency: EXEC Office Contact person Rick Ybarra Phone 206-263-9651

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name John Gerberding Version Final Date 2/4/2020 @ 2:29pm

### Dept. Director or Designee Review

Name Rachel Smith Version Final Date 1/24/2020 @ 12:30pm

### Performance Strategy & Budget Office Review

Name \_\_\_\_\_ Version \_\_\_\_\_ Date \_\_\_\_\_

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

Name Bruce Ritzen, Council Staff Version Final ✓ Date 2/4/2020 @ 1:55pm

### Executive Office Review & Transmittal Approval

Name Shannon Braddock Version Final Date 1/24/2020 @ 12:30pm

## ENTRANCE CRITERIA REVIEW

### EXEC OFFICE (initials) KCC CLERK

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