

BFM  
DU  
500400

# Legislative Review Form

Harborview  
Medical Center  
Warrants



## King County

# 2018-272

Agency: DES/FBOD

Contact person: MEN GUY

Phone 263-9254

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name: Peggy Pahl

Version: Final

Date: 4/13/2018

### Dept. Director or Designee Review

Name: Tom Koney, DES Deputy Director Version: Final

*OK*

Date 4-26-18

### Performance Strategy & Budget Office Review

Name Sid Bender

Version Final

Date 5-23-18

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

Name: Bruce Ritzen

Version: Final

Date: 4/13/2018

### Executive Office Review & Transmittal Approval

Name SHANNON BRADDOCK Version Final

Date 5-30-18

*update: searchable versions received 6/14/18*

*The HMC request letter and response to HMC were not searchable ETR 9/29/18*

RECEIVED  
2018 MAY 31 AM 8:11  
H.M.C. CLERK  
COUNCIL

## ENTRANCE CRITERIA REVIEW

	<u>EXEC OFFICE (initials)</u>			<u>KCC CLERK</u>		
Fiscal note?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<u>LW</u>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<u>LW</u>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<u>LW</u>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<u>LW</u>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Costs identified/described in letter	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>LW</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<u>No</u>
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>LW</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<u>No</u>
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<u>LW</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<u>No, then</u>
Potential Annexation Area (PAA) impacts identified?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>LW</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<u>No Yes</u>
Advertising required? if yes, cite all pertinent code/laws.	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>LW</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<u>No</u>
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>LW</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<u>No</u>

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