

Legislative Review Form

*Northshore
DPH
Appropriation*

2016-389



King County

Agency: DES/FMD Contact person Anthony Wright Phone 477-9352

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name Tom Kuffel Version **Final** Date July 12, 2016

Dept. Director or Designee Review

Name Caroline Whalen, DES Director Version **Final** Date 7-19-16

Performance Strategy & Budget Office Review

Name Sid Bender Version Final Date _____

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

Name Bruce Ritzen, Council Staff Version **Final** Date July 14, 2016

Executive Office Review & Transmittal Approval

Name Michelle Alisen Version Final Date _____

RECEIVED
 2016 JUL 21 AM 9:23
 KING COUNTY CLERK
 KING COUNTY COUNCIL

*CRF Not returned
already had
intro slip*

ENTRANCE CRITERIA REVIEW

	<u>EXEC OFFICE (initials)</u>	<u>KCC CLERK</u>
Fiscal note?	Y <input checked="" type="checkbox"/> NA <input 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 checked="" 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 checked="" 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 This ordinance is one of three ordinances related to Northshore Public Health. The second involves the lease for this location and the third involves the sale of the Northshore Public Health Building in Bothell.