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BPM
5/24/16

Legislative Review Form

BSIC
Supplemental



King County

2016-282

Agency: DCHS Contact person Adrienne Quinn Phone 263-9100

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name Peggy Pahl Version Final Date 5/24/2016

Dept. Director or Designee Review

Name Adrienne Quinn Version Final Date 5/24/2016

Performance Strategy & Budget Office Review

Name Emmy McConnell Version Final Date

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

Name Bruce Ritzen Version Final Date 5/24/2016

Executive Office Review & Transmittal Approval

Name Michelle Allison Version Final Date

RECEIVED
2016 JUN -1 PM 4: 14
CLERK
KING COUNTY COUNCIL

ENTRANCE CRITERIA REVIEW

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