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Legislative Review Form

Tanya Hannah
named Director
of KCI



2018-194

King County

Agency: DES/HRD Contact person: Jay Osborne Phone 206-477-3628

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name: Karen Pool Norby Version: **Final** Date 4/6/18

Dept. Director or Designee Review

Name Jay Osborne, Interim Human Resources Director Version **Final** Date 4/10/18

Performance Strategy & Budget Office Review

Name *NA* Version Date

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

Name Bruce Ritzen Version **Final** ✓ Date 4/6/2018

Executive Office Review & Transmittal Approval

Name *Shannon Braddock* Version **Final** Date *4-10-18*

ENTRANCE CRITERIA REVIEW

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

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