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Legislative Review Form

Metro Service
Changes (NEMP)

2019-139

King County

Agency: Transit Contact person: Grace Carlson Phone: (206) 263-0929

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name: Cheryl Carlson Version: Final Date 01/28/2019

Dept. Director or Designee Review

Name: Rob Gannon Version Date 2/19/19

Performance Strategy & Budget Office Review

Name Shelley DeWys Version Final Date 3/15/19

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

Name: Bruce Ritzen Version Final Date 1/30/2019

Executive Office Review & Transmittal Approval

Name Shannon Braddock Version Final Date

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2019 MAR 15 PM 1:51
KING COUNTY COUNCIL CLERK

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

Fiscal note?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
Costs identified/described in letter	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
Potential Annexation Area (PAA) impacts identified?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	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"/>	epn	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	Y <input type="checkbox"/>	NA <input type="checkbox"/>

NO
NO
NO
NO

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