

Legislative Review Form



2019-302

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KING COUNTY COUNCIL

King County

Agency: EXEC Office Contact person Rick Ybarra Phone 206-263-9651

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name John Gerberding Version Final Date 6/12/2019 @ 4:37pm

Dept. Director or Designee Review

Name Rachel Smith Version Final Date 6/14/2019 @ 12:30pm

Performance Strategy & Budget Office Review

Name _____ Version _____ Date _____

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

Name Bruce Ritzen, Council Staff Version Final Date 6/14/2019 @ 2:47pm

Executive Office Review & Transmittal Approval

Name Shannon Braddock Version Final Date 6/14/2019 @ 12:30pm

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

Fiscal note?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>eph</u>	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<u>eph</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>eph</u>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
All pertinent attachments listed/labeled?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>eph</u>	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>
Costs identified/described in letter	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>eph</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/> <u>NB</u>
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>eph</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/> <u>NB</u>
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<u>eph</u>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
Potential Annexation Area (PAA) impacts identified?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>eph</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/> <u>NB</u>
Advertising required? if yes, cite all pertinent code/laws.	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>eph</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/> <u>NB</u>
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>eph</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/> <u>NB</u>

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