

DU  
BFM  
WSH

# Legislative Review Form

Token  
Lake  
Sale



## King County

# 2017-233

Agency: DES/FMD

Contact person Anthony Wright

Phone 206-477-9352

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name John Briggs

Version **Final**

Date May 2, 2017

### Dept. Director or Designee Review

Name Tom Koney, DES Deputy Director

Version **Final** *OK*

Date *2017 MAY 25 PM 3:51*

### 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 April 5, 2017

### Executive Office Review & Transmittal Approval

Name *Shannon Braddock* Version **Final**

Date

RECEIVED  
2017 MAY 25 PM 3:51  
KING COUNTY 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"/>	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 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 checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Any special circumstances affecting processing time?	Y <input 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