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Legislative Review Form RECEIVED

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CLERK
KING COUNTY COUNCIL

2019-396



King County

Agency: DES/FMD Contact person Anthony Wright Phone 206-477-9352

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name Wesley Brenner Version Final Date August 1, 2019

Dept. Director or Designee Review

Name Tom Koney, DES Deputy Director Version Final *CK* Date 8.21.19

Performance Strategy & Budget Office Review

Name Sid Bender Version Final Date 9/4/19

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

Name Bruce Ritzen, Council Staff Version Final ✓ Date July 1, 2019

Executive Office Review & Transmittal Approval

Name Shannon Braddock Version Final Date 9/11/19

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

Fiscal note?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<i>epn</i>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<i>epn</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>epn</i>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<i>epn</i>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
Costs identified/described in letter	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<i>epn</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>epn</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>epn</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>epn</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>epn</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>epn</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