

KL

# Legislative Review Form



## King County

Receipts  
AVA  
Frisinger  
2014-284

Agency: DES/OCROG Contact person Rick Ybarra Phone: 206-263-9651

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name John Gerberding, PAO Version **Final** Date 5/29/2014 @ 11:33am

### Dept. Director or Designee Review

Name Kelli Williams, Director, OCROG Version **Final** Date

### Performance Strategy & Budget Office Review

Name N/A Version Date

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

Name Bruce Ritzen, Council Staff Version **Final** Date 5/28/2014 @ 10:08am ✓

### Executive Office Review & Transmittal Approval

Name Joe Woods, Deputy Chief of Staff Version **Final** Date 5/23/2014 @ 9:30 am

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JUN 27 PM 3:42  
CLERK  
COUNCIL

## ENTRANCE CRITERIA REVIEW

### EXEC OFFICE (initials) KCC CLERK

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

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