

BPM

# Legislative Review Form

DJA  
copy fees



## King County

# 2014-399

Agency: Dept of Judicial Administration  
Bailey, Deputy Director Phone 477-0768

Contact person Teresa

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name Roger Davidheiser Version Final

Date June 26, 2014

### Dept. Director or Designee Review

Name Teresa Bailey Version Final

Date June 20, 2014

### Performance Strategy & Budget Office Review

Name Elly Slakie Version Final

Date August 2, 2014

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

Name Bruce Ritzin Version Final

Date June 13, 2014

### Executive Office Review & Transmittal Approval

Name Joe Woods Version Final

Date

2014 SEP 22 PM 12:44  
CLEARED  
COUNTY COUNCIL  
RECEIVED

## 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 checked="" type="checkbox"/>	NA <input type="checkbox"/>
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input checked="" 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 checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
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"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Advertising required? if yes, cite all pertinent code/laws.	Y <input checked="" type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input checked="" 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 n/a