



King County

Legislative Review Form

*KC11A
oral report
motion*

2015-530

Agency: DOT-Airport Division Contact person Bill Greene Phone 477-3820

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name Ian Taylor Version Draft/Edits Incorporated Date: 11-23-2015

Dept. Director or Designee Review

Name Jane Brown Version final Date 11-25-15

Performance Strategy & Budget Office Review

Name NIA Version _____ Date _____

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

Name Bruce Ritzen Version Final Date 11/25/15

Executive Office Review & Transmittal Approval

Name Michelle Allison Version final Date _____

RECEIVED
DIS DEC -3 AM 10:41
KING COUNTY COUNCIL CLERK

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

Fiscal note?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	S	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	S	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	S	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
All pertinent attachments listed/labeled?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	S	Y <input type="checkbox"/>	NA <input type="checkbox"/>	No
Costs identified/described in letter	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	S	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	S	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"/>	S	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"/>	S	Y <input type="checkbox"/>	NA <input type="checkbox"/>	No
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	S	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