

Legislative Review Form



King County

Agency: DCHS Contact person Leo Flor Phone 477-4384

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name Howard Schneiderman Version Date 5-12-20

Dept. Director or Designee Review

Name Leo Flor Version Date 5-22-20

Performance Strategy & Budget Office Review

Name: Emmy McConnell Version: Final Date: 5/27/20

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

Name Bruce Ritzen Version Date 5-13-20

Executive Office Review & Transmittal Approval

Name: Karan Gill Version: Final Date: 5/28/20

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

Fiscal note?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	BB	Y <input type="checkbox"/>	NA <input type="checkbox"/>
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	BB	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	BB	Y <input type="checkbox"/>	NA <input type="checkbox"/>
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	BB	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Costs identified/described in letter	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	BB	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	BB	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	BB	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Potential Annexation Area (PAA) impacts identified?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	BB	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Advertising required? if yes, cite all pertinent code/laws.	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	BB	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	BB	Y <input type="checkbox"/>	NA <input type="checkbox"/>