

Mobility
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King County

Legislative Review Form

2018-233

International
Brotherhood of
Electrical workers

Agency: Office of Labor Relations Contact person Megan Pedersen Phone 263-2898

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name Susan Slonecker Version Final

Date 3/26/18

Dept. Director or Designee Review

Name Megan Pedersen Version Final

Date 4/9/18

Performance Strategy & Budget Office Review

Name Shelley DeWys Version Final

Date 4/20/18

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

Name Bruce Ritzen Version Final

Date 3/20/18

Executive Office Review & Transmittal Approval

Name Shannon Barddock Version Final

Date

RECEIVED
2018 APR 23 AM 11:13
CLERK
KCC COUNCIL

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

	EXEC OFFICE (initials)	KCC CLERK
Fiscal note?	Y <input checked="" type="checkbox"/> NA <input type="checkbox"/> <i>LS</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>LS</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>LS</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>LS</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>LS</i>	Y <input type="checkbox"/> NA <input type="checkbox"/> NO
Regulatory Note Required and Complete?	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/> <i>LS</i>	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/>
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/> NA <input type="checkbox"/> <i>LS</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>LS</i>	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/>
Advertising required? if yes, cite all pertinent code/laws.	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/> <i>LS</i>	Y <input type="checkbox"/> NA <input type="checkbox"/> NO
Any special circumstances affecting processing time?	Y <input type="checkbox"/> NA <input checked="" type="checkbox"/> <i>LS</i>	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