

Trice  
Adam  
MB

# 2016-453 Legislative Review Form

Transit  
Security plan  
& motion



## King County

Agency: DOT/Transit

Contact person: Nancy Buonanno-Grennan Phone: 477-3274

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name Jennifer Merkel Version Final Date 08/01/16

### Dept. Director or Designee Review

Name *[Signature]* Version Final Date 8/18/16

### Performance Strategy & Budget Office Review

Name ~~N/A~~ Shelley DeWys Version final Date

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

Name Bruce Ritzen Version Final Date 08/01/16

### Executive Office Review & Transmittal Approval

Name Fred Jarrett Version final Date

RECEIVED  
2016 SEP - 1 PM 4:06  
KCC CLERK  
KING COUNTY COUNCIL

### ENTRANCE CRITERIA REVIEW

	<u>EXEC OFFICE (initials)</u>		<u>KCC CLERK</u>	
Fiscal note?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input 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 type="checkbox"/>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
Costs identified/described in letter	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	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"/>	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"/>	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 <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: N/A