

J Med  
BPM  
Hansen

2015-091

# Legislative Review Form

~~cancel~~  
property tax  
write off  
report



## King County

Agency: DES/HRD Contact person: Scott Matheson Phone: 6-7333

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name Peggy Pahl Version **Final** Date: 1/15/14

### Dept. Director or Designee Review

Name Tom Koney, DES Deputy Director Version **Final** Date: 01/27/14

### Performance Strategy & Budget Office Review

Name: **T J Stutman** Version **final** Date:

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

Name Bruce Ritzen, Council Staff Version **Final** Date: 1/23/14 ✓

### Executive Office Review & Transmittal Approval

Name **Joe Woods** Version **final** Date

RECEIVED  
2015 FEB 24 PM 3:49  
CLERK  
KING COUNTY COUNCIL

## 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 type="checkbox"/>	NA <input type="checkbox"/>
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input 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 type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y <input 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 type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input 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"/>

No  
No  
No  
No

Other background information not included in transmittal letter, including explanation of impact to cities, county agencies, or stakeholders: N/A