

RD

Legislative Review Form

rcapp  
Jose Wisco



**King County**

Agency: DES/OCROG Contact person Rick Ybarra Phone: 206-263-9651

Ordinance  Motion  Proviso  Report  Other

Civil Division Prosecuting Attorney Review

Name John Gerberding, PAO Version **Final** Date 10/25/14 @10:15am

Dept. Director or Designee Review

Name Kelli Williams, Director, OCROG Version **Final** Date

Performance Strategy & Budget Office Review

Name N/A Version Date

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

Name Bruce Ritzen, Council Staff Version **Final** Date 10/24/14 @ 3:59pm ✓

Executive Office Review & Transmittal Approval

Name Joe Woods, Deputy Chief of Staff Version **Final** Date 10/23/14 @ 4:00pm

RECEIVED  
2014 NOV -7 PM 3:36  
KING COUNTY CLERK  
KING COUNTY COUNCIL

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

Fiscal note?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y	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	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	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Costs identified/described in letter	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y	Y <input type="checkbox"/>	NA <input type="checkbox"/>	No
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y	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	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	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	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	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