

BEM  
CB  
AK

# Legislative Review Form

Supplemental for  
Mobility framework  
Scoping

# 2019-167



## King County

Agency: Transit Contact person: Thomas Moran Phone: 206-477-5822

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name Jenifer Merkel Version Final Date 3/26/2019

### Dept. Director or Designee Review

Name Rob Gannon Version Final Date 3/28/19

### Performance Strategy & Budget Office Review

Name TJ Stutman Version Final Date 4/30/19

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

Name Bruce Ritzen Version Final Date 3/27/2019

### Executive Office Review & Transmittal Approval

Name ~~Shannon Braddock~~ Version Final Date 4/9/19  
Jennifer Huston

RECEIVED  
2019 APR 18 AM 9:22  
KING COUNTY COUNCIL CLERK

### ENTRANCE CRITERIA REVIEW

	<u>EXEC OFFICE (initials)</u>			<u>KCC CLERK</u>		
Fiscal note?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
All pertinent attachments listed/labeled?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	Y <input type="checkbox"/>	NA <input type="checkbox"/>	NO
Costs identified/described in letter	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	Y <input type="checkbox"/>	NA <input type="checkbox"/>	NO
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	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"/>	epn	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Potential Annexation Area (PAA) impacts identified?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	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"/>	epn	Y <input type="checkbox"/>	NA <input type="checkbox"/>	No
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	epn	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