

GAO  
PVR  
LK

# Legislative Review Form



## King County

Accountable  
Care network  
rent and  
motion  
2017-052

Agency: DES - HRD Contact person Kerry Schaeffer Phone 263-8505

Ordinance  Motion  Proviso  Report  Other

### Civil Division Prosecuting Attorney Review

Name **Stephen Teply** Version **Final** Date 1/6/17

### Dept. Director or Designee Review

Name **Caroline Whalen, DES Director** Version **Final** Date **1-9-17**

### Performance Strategy & Budget Office Review

Name **T.J. Stetman** Version **final** Date

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

Name **Bruce Ritzen** Version **Final** Date 12/28/16

### Executive Office Review & Transmittal Approval

Name **Shannon Braddock** Version **final** Date

RECEIVED  
2017 FEB -2 PM 3:49  
KING COUNTY COUNCIL  
CLERK

### 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"/>
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"/>
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 checked="" type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y <input type="checkbox"/>	NA <input type="checkbox"/>

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