## **Legislative Review Form**



m summit 8th 2014-332

Agency: _DES/FMD	Contact person Kathy	Brown Phone	296-0630
Ordinance Motion P	roviso Report	Other	
Civil Division Prosecuting Attorney	Review		
Name Ian Taylor	Version Final	Date 7	1/7/14
Dept. Director or Designee Review			THE THE
Name Tom Koney, DES Deputy Di	rector K Versio	on <mark>Final</mark>	Date 7
Performance Strategy & Budget Off	ice Review		
Name Smilker Dewys	Version final	Date	SELVED SELVED
Technical Form/Code Reviser Review - Confirm adherence to legislative format			
NameBruce Ritzen, Council Staff	Version Final	Date 7	. /
Executive Office Review & Transm	ittal Approval		
Name Joe Woods	Version for	Date	
ENTRANCE CRITERIA REVIEW			
	EX	EC OFFICE (initia	ls) KCC CLERK
Fiscal note?		NA 🗌 🔻	YNA NA
D 0 10		NA D	YN NA
All pertinent attachments listed/label		NA D	Y NA
Costs identified/described in letter	Y		Y NA NA NA
Regulatory Note Required and Complete?		•	Y NA NA
Formatted/Delivered in word-searchable doc format?			Y NA
Potential Annexation Area (PAA) impacts identified?		NA X	Y NA NA
Advertising required? if yes, cite all pertinent code/laws.  Any special circumstances affecting processing time?  NA  NA  NA			Y NA
and openial enformstances affecting ]	processing time? Y	NA 🗆 V	Y NA
Other background information not inc	cluded in transmittal lette	er, including explana	tion of impact to cities,

county agencies, or stakeholders Circumstances impacting time are included in the transmittal letter. Tony See transmittel