

Legislative Review Form

2015-094

appointing
John Forsyth

KL
LW/HAS
Soo/HBO



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 1/2/2015 @ 12:57pm

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 12/19/2014 @ 3:48pm

Executive Office Review & Transmittal Approval

Name Joe Woods, Deputy Chief of Staff Version **Final** Date 12/12/14 @ 10:00 am

RECEIVED
2015 FEB 24 PM 3:53
KING COUNTY COUNCIL CLERK

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

Fiscal note?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>Y</u>	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<u>v</u>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<u>r</u>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<u>h</u>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Costs identified/described in letter	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>h</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<u>No</u>
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>h</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<u>No</u>
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	<u>h</u>	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	
Potential Annexation Area (PAA) impacts identified?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>h</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<u>No</u>
Advertising required? if yes, cite all pertinent code/laws.	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>h</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<u>No</u>
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	<u>h</u>	Y <input type="checkbox"/>	NA <input type="checkbox"/>	<u>No</u>

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