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Legislative Review Form

EMAP
rept &
motion



2015-324

King County

Agency: DES/OEM Contact person: Walt Hubbard Phone: 206-205-4060

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name Amy Eiden Version Final Date 07/08/15

Dept. Director or Designee Review

Name Caroline Whalen, DES Director Version Date 07/10/15

Performance Strategy & Budget Office Review

Name *Yiling Wang* Version *final* Date

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

Name Anne Noris, Council Staff Version Final Date 07/08/15

Executive Office Review & Transmittal Approval

Name *Michelle Allison* Version Date

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2015 JUL 31 PM 3:43
DES/OEM
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 type="checkbox"/>
KC Strategic Plan reference in letter?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Proof read for spelling and grammar?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y	Y <input type="checkbox"/>	NA <input type="checkbox"/>
All pertinent attachments listed/labeled?	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Costs identified/described in letter	Y <input checked="" type="checkbox"/>	NA <input type="checkbox"/>	Y	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Regulatory Note Required and Complete?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y	Y <input type="checkbox"/>	NA <input type="checkbox"/>
Formatted/Delivered in word-searchable doc format?	Y <input checked="" type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y	Y <input 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"/>
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"/>
Any special circumstances affecting processing time?	Y <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	Y	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