

BFLM
04
WSH

Legislative Review Form

Special Revenue
Fund for the
DO in DNRP



King County

2018-489

Agency: PSB Contact person: Dwight Dively Phone: 263-9687

Ordinance Motion Proviso Report Other

Civil Division Prosecuting Attorney Review

Name Jenifer Merkel, Peggy Pahl Version Final Date 6/29/18

Dept. Director or Designee Review

Name Dwight Dively Version Final Date

Performance Strategy & Budget Office Review

Name Tricia Davis Version Final Date 8/29/18

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

Name Bruce Ritzen Version Final Date 8/21/18

Executive Office Review & Transmittal Approval

Name *Dwight Dively* Version *Final* Date *9/21/18*

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

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

Other background information not included in transmittal letter, including explanation of impact to cities, county agencies, or stakeholders No Fiscal Impact

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KING COUNTY COUNCIL