

HHS
JKW
Curry



King County

Legislative Review Form

2019-119

Housing Investment plan
2nd Housing Engagement
plan

Agency: DCHS

Contact person Leo Flor

Phone 263-9100

Ordinance ☐ Motion ☒ Proviso ☐ Report ☒ Other ☐

Civil Division Prosecuting Attorney Review

Name Mike Sinsky

Version Final

Date 2/20/29

Dept. Director or Designee Review

Name Leo Flor

Version Final

Date 2/27/19

Performance Strategy & Budget Office Review

Name Emmy McConnell

Version Final

Date 3/1/19

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

Name Bruce Ritzen

Version Final

Date 2/20/19

Executive Office Review & Transmittal Approval

Name Shannon Braddock

Version Final

Date

RECEIVED
2019 MAR -1 PM 5:04
CLERK
KING COUNTY COUNCIL

ENTRANCE CRITERIA REVIEW

EXEC OFFICE (initials) KCC CLERK

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

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