



# PROPOSED RULE MAKING

## CR-102 (June 2012)

(Implements RCW 34.05.320)

Do NOT use for expedited rule making

Agency: Department of Labor and Industries

<input checked="" type="checkbox"/> Preproposal Statement of Inquiry was filed as WSR 14-09-090 ; or	<input type="checkbox"/> Original Notice
<input type="checkbox"/> Expedited Rule Making--Proposed notice was filed as WSR _____; or	<input type="checkbox"/> Supplemental Notice to WSR _____
<input type="checkbox"/> Proposal is exempt under RCW 34.05.310(4) or 34.05.330(1).	<input checked="" type="checkbox"/> Continuance of WSR 15-04-115

Title of rule and other identifying information: (Describe Subject) Chapter 296-900 WAC, Administrative Rules

Hearing location(s):

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Submit written comments to:

Name: Cynthia Ireland  
Address: PO Box 44620, Olympia, WA 98504-4620  
e-mail [Cynthia.ireland@lni.wa.gov](mailto:Cynthia.ireland@lni.wa.gov)  
fax (360)902-5619 by (date) April 14, 2015 at 5 p.m.

Assistance for persons with disabilities: Contact

\_\_\_\_\_ by \_\_\_\_\_

TTY ( ) \_\_\_\_\_ or ( ) \_\_\_\_\_

Date of intended adoption: June 1, 2015

(Note: This is NOT the effective date)

Purpose of the proposal and its anticipated effects, including any changes in existing rules:

Reasons supporting proposal:

Statutory authority for adoption:

Statute being implemented:

Is rule necessary because of a:

Federal Law?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Federal Court Decision?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
State Court Decision?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If yes, CITATION:

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER  
STATE OF WASHINGTON  
FILED

DATE: March 31, 2015

TIME: 12:51 PM

WSR 15-08-089

DATE  
3/31/2015

NAME (type or print)  
Joel Sacks

SIGNATURE

TITLE  
Director

**Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters:**

**Name of proponent:** (person or organization)

- Private  
 Public  
 Governmental

**Name of agency personnel responsible for:**

Name	Office Location	Phone
Drafting.....		( )
Implementation....		( )
Enforcement.....		( )

**Has a small business economic impact statement been prepared under chapter 19.85 RCW or has a school district fiscal impact statement been prepared under section 1, chapter 210, Laws of 2012?**

Yes. Attach copy of small business economic impact statement or school district fiscal impact statement.

A copy of the statement may be obtained by contacting:

Name:

Address:

phone ( ) \_\_\_\_\_

fax ( ) \_\_\_\_\_

e-mail \_\_\_\_\_

No. Explain why no statement was prepared.

**Is a cost-benefit analysis required under RCW 34.05.328?**

Yes A preliminary cost-benefit analysis may be obtained by contacting:

Name:

Address:

phone ( ) \_\_\_\_\_

fax ( ) \_\_\_\_\_

e-mail \_\_\_\_\_

No: Please explain: