

Executive Order 562
Regulation Review Checklist

Approval			
Approval Level	Name	Agency/Secretariat	Date Approved
Agency Head			
Secretary			
Agency Contact(s) for This Specific Regulation			
Name	E-Mail	Phone	
Overview			
CMR Number			
Regulation Title			
<input type="checkbox"/> Draft regulation		<input type="checkbox"/> Final regulation	
General Regulatory Themes			
✓ Please check all that apply			
<input type="checkbox"/> Building Codes/Accessibility Standards		<input type="checkbox"/> Housing	
<input type="checkbox"/> Children and Families		<input type="checkbox"/> Internal State Government Operations and Finance	
<input type="checkbox"/> Doing Business in MA		<input type="checkbox"/> Licensing and Permitting	
<input type="checkbox"/> Education		<input type="checkbox"/> Persons with Disabilities	
<input type="checkbox"/> Elders		<input type="checkbox"/> Public Safety	
<input type="checkbox"/> Energy and Utilities		<input type="checkbox"/> State/Local Government Relations	
<input type="checkbox"/> Environmental Protection		<input type="checkbox"/> Tax and Revenue	
<input type="checkbox"/> Health Care		<input type="checkbox"/> Other	
Type of Proposed Action			
✓ Please check all that apply			
<input type="checkbox"/>	Retain the regulation in current form		
<input type="checkbox"/>	New regulation (Please provide statutory cite requiring regulation:		
<input type="checkbox"/>	Emergency regulation (Please indicate the date regulation must be adopted:		
<input type="checkbox"/>	Amended regulation (Please indicate the date regulation was last revised:		
<input type="checkbox"/>	Technical correction		
<input type="checkbox"/>	Rescission (Indicates full rescission of regulation – if only eliminating section(s) identify as an amendment.		
<input type="checkbox"/>	Other Explain:		

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Summary of Proposed Action	
Please describe the purpose of the regulation:	
Please describe the purpose of the change. If you are not proposing a change, please explain why the regulation is retained in current format:	
Nature of / Reason for the Proposed Action	
✓ Please check all that apply	
<input type="checkbox"/>	Change in case law
<input type="checkbox"/>	Change in federal statute
<input type="checkbox"/>	Change in state statute
<input type="checkbox"/>	Change in technology/circumstances
<input type="checkbox"/>	Clarifies language and purpose of regulation
<input type="checkbox"/>	Eliminates conflicting state requirements
<input type="checkbox"/>	Eliminates section(s) or entire regulation because outdated – area(s) no longer regulated
<input type="checkbox"/>	Eliminates unnecessary or duplicative state requirement(s)
<input type="checkbox"/>	Ensure state regulation conforms to federal law(s) or regulation(s)
<input type="checkbox"/>	Improves organization or readability of regulation
<input type="checkbox"/>	Makes it easier for agency to implement and/or administer
<input type="checkbox"/>	Meets statutory requirements in a more effective way
<input type="checkbox"/>	Reduces fees or specific costs to regulation party
<input type="checkbox"/>	Reduces regulatory burden
<input type="checkbox"/>	Reduces reporting requirements
<input type="checkbox"/>	Saves time or money for public or regulated party
<input type="checkbox"/>	Saves time or money for state agency
<input type="checkbox"/>	Simplifies steps required for regulated party to comply
<input type="checkbox"/>	Other (explain below)

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Increases to Requirements or Fees	
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✓ Please check all that apply

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Adds new requirements that the regulated party must comply with |
| <input type="checkbox"/> | Adds fees or costs to the regulated party |
| <input type="checkbox"/> | Adds a license or permitting requirement |
| <input type="checkbox"/> | Adds reporting requirements |

If increases to requirements, fees, or costs of compliance would result from proposed change(s), please explain.

Cross-Jurisdictional Issues

Please list all related/overlapping jurisdictions:

Have you notified these agencies and or jurisdiction of the action you are planning to take?

Have you requested comments from these agencies and or jurisdictions? If "yes" explain the comments below:

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Cost-Benefit Analysis	
<i>(Please describe the savings, benefits, and costs of this regulation to each listed party)</i>	
What are the benefits of this regulation to:	
State Government	
Economy	
Regulated Party	
Public	
What are the costs related to this regulation to:	
State Government	
Economy	
Regulated Party	
Public	
What are the savings from this regulation to:	
State Government	
Economy	
Regulated Party	
Public	
Do the benefits outweigh or justify the costs? Why?	
State Government	
Economy	
Regulated Party	
Public	
Additional Comments/Issues Not Earlier Addressed by This Review	
Required Attachments	
✓ Please check all that apply	
<input type="checkbox"/>	Red-lined version of proposed regulation
<input type="checkbox"/>	Text of statute or other legal basis for regulation
<input type="checkbox"/>	*Regulatory Impact Statement (<i>form under development – to be distributed at a later date</i>)