

ORDINANCE/RESOLUTION REQUEST

Please email requests to Nancy Kuhn at
Nancy.kuhn@denvergov.org by **NOON on Monday**.

****All fields must be completed.****
Incomplete request forms will be returned to sender which may cause a delay in processing.

Date of Request: July 29, 2013

Please mark one: ☒ Bill Request or ☐ Resolution Request

1. Has your agency submitted this request in the last 12 months?

☐ Yes ☒ No

If yes, please explain:

2. **Title:** Funding and Assignment Agreement for Cultural Facilities Work for the Denver Art Museum.

3. **Requesting Agency:** Public Works / Better Denver Bond Program

4. **Contact Person:** (With actual knowledge of proposed ordinance/resolution.)

- **Name:** Terri Goodwin
- **Phone:** 720-913-1766
- **Email:** terri.goodwin@denvergov.org

5. **Contact Person:** (With actual knowledge of proposed ordinance/resolution who will present the item at Mayor-Council and who will be available for first and second reading, if necessary.)

- | | |
|--|--|
| ▪ Name: Scott Hergenrader | Shawn Ropp |
| ▪ Phone: 720-913-0819 | 720-865-3025 |
| ▪ Email: scott.hergenrader@denvergov.org | shawn.ropp@denvergov.org |

6. **General description of proposed ordinance including contract scope of work if applicable:**

This Ordinance provides \$3,000,000 of the Cultural Facilities Bond Program funding and delegates authority to the Denver Art Museum to plan, design, and construct New Construction Projects (Purpose 8, Measure H). Work will include First Floor Gallery new construction and associated lighting, technology and security upgrades.

*****Please complete the following fields:*** (Incomplete fields may result in a delay in processing. If a field is not applicable, please enter N/A for that field.)

- a. **Contract Control Number:** N/A
- b. **Duration:** July 1, 2014
- c. **Location:** 100 West 14th Street, Denver, CO 80204
- d. **Affected Council District:** District 1
- e. **Benefits:**
- f. **Costs:** N/A

7. **Is there any controversy surrounding this ordinance?** (Groups or individuals who may have concerns about it?) **Please explain.**

None.

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: _____

Date Entered: _____