## ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by 3:00pm on Monday. For any questions please contact Skye Stuart.

\*All fields must be completed.\*

Incomplete request forms will be returned to sender which may cause a delay in processing.

						Date of Request:	7/20/17
Please mark one:		Bill Request	or		<b>Resolution Reques</b>	t	
1.	Has your agency submitted this request in the last 12 months?						
	☐ Yes	⊠ No					
	If yes, please	explain:					
2.	Title: (Include a concise, one sentence <u>description</u> – please include <u>name of company or contractor</u> and <u>contract control number</u> - that clearly indicates the type of request: grant acceptance, contract execution, contract amendment, municipal code change, supplemental request, etc.)						
	Official Map Amendment, Application #2017I-00054, Rezoning 385, 395, 405, & 415 S. Cherokee St. from I-B UO-2 to C-MX-16						
3.	Requesting Agend	cy: CPD					
4.	<ul> <li>Contact Person: (With actual knowledge of proposed ordinance/resolution.)</li> <li>Name: Scott Robinson</li> <li>Phone: 720-865-2833</li> <li>Email: scott.robinson@denvergov.org</li> </ul>						
5.	<ul><li>will be available for</li><li>Name: Scott</li><li>Phone: 720-8</li></ul>				nce/resolution <u>who w</u>	vill present the item at M	Mayor-Council and who
6.	General description/background of proposed ordinance including contract scope of work if applicable:						
	Official Map Ame	ndment, Application #201	7I-00054,	Rezoni	ang 385, 395, 405, &	415 S. Cherokee St. from	m I-B UO-2 to C-MX-
		<b>following fields:</b> (Incomp – please do not leave blar		may res	sult in a delay in pro	cessing. If a field is not	applicable, please
	a. Contract	Control Number: N/A					
	b. Contract						
	c. Location		S. Cherokee	e St.			
	T	Council District: 7  Rezoning will match z	zoning to a	victina	davalanment		
		Amount (indicate amen	_	_	=	: N/A	
7.	Is there any contrexplain.	oversy surrounding this	ordinance	e? (Gro	oups or individuals w	ho may have concerns a	about it?) Please
	None						
		То ве	e completed	d by Ma	ayor's Legislative Te	 vam:	
SIRE Tracking Number:					Date Entered:		