

ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor’s Legislative Team

at MileHighOrdinance@DenverGov.org by **3:00pm on Monday**. Contact the Mayor’s Legislative team with questions

Date of Request: 1/24/22

Please mark one: Bill Request or Resolution Request

1. Type of Request:

- Contract/Grant Agreement Intergovernmental Agreement (IGA) Rezoning/Text Amendment
- Dedication/Vacation Appropriation/Supplemental DRMC Change
- Other:

2. Title: (Start with *approves, amends, dedicates*, etc., include name of company or contractor and indicate the type of request: grant acceptance, contract execution, contract amendment, municipal code change, supplemental request, etc.)

Approves an Official Map Amendment to change the zoning of the property located at 6298 N. Argonne Street from C-MU-20 w/ Waivers and Conditions, Airport Influence Overlay (AIO) and C-MU-30 w/ Waivers and Conditions, UO-1, AIO to S-MX-3, AIO in the DIA Neighborhood.

3. Requesting Agency: Community Planning and Development

4. Contact Person:

Contact person with knowledge of proposed ordinance/resolution	Contact person to present item at Mayor-Council and Council
Name: Libby Kaiser	Name: Libby Kaiser
Email: Libby.Kaiser@denvergov.org	Email: Libby.Kaiser@denvergov.org

5. General description or background of proposed request. Attach executive summary if more space needed:

Official Map Amendment to rezone 272,960 sq. ft. of a property located at 6298 N. Argonne Street from C-MU-20 w/ Waivers and Conditions, Airport Influence Overlay (AIO) and C-MU-30 w/ Waivers and Conditions, UO-1, AIO to S-MX-3, AIO in the DIA Neighborhood.

6. City Attorney assigned to this request (if applicable):

7. City Council District: District 11

8. **For all contracts, fill out and submit accompanying Key Contract Terms worksheet**

To be completed by Mayor’s Legislative Team:

Resolution/Bill Number: _____

Date Entered: _____

Key Contract Terms

Type of Contract: (e.g. Professional Services > \$500K; IGA/Grant Agreement, Sale or Lease of Real Property):

Vendor/Contractor Name:

Contract control number:

Location:

Is this a new contract? Yes No Is this an Amendment? Yes No If yes, how many? _____

Contract Term/Duration (for amended contracts, include existing term dates and amended dates):

Contract Amount (indicate existing amount, amended amount and new contract total):

<i>Current Contract Amount</i> (A)	<i>Additional Funds</i> (B)	<i>Total Contract Amount</i> (A+B)
<i>Current Contract Term</i>	<i>Added Time</i>	<i>New Ending Date</i>

Scope of work:

Was this contractor selected by competitive process?

If not, why not?

Has this contractor provided these services to the City before? Yes No

Source of funds:

Is this contract subject to: W/MBE DBE SBE XO101 ACDBE N/A

WBE/MBE/DBE commitments (construction, design, Airport concession contracts):

Who are the subcontractors to this contract?

To be completed by Mayor's Legislative Team:

Resolution/Bill Number: _____

Date Entered: _____