ORDINANCE/RESOLUTION REQUEST

Please email requests to Daelene Mix at

Nancy.khun@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 R	equest:	October 7, 2013
Please mark one:		Bill Request	t	or	Reso	lution Reques	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 description – 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, amendment, municipal code change, supplemental request, etc.)								
	Request for #407, Series		relinquis	sh certa	ain easem	ents establis	shed in Ordin	ance nu	mber Ordinance
3.	Requesting Agenc	y: Right of Way Er	ngineering	Service	es				
4.	Contact Person: (Name: Vane: Phone: 720-9 Email: vanes	ssa West		posed o	ordinance/r	esolution.)			
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: Nancy Kuhn Phone: 720-865-8720 Email: nancy.kuhn@denvergov.org								
6.	General description of proposed ordinance including contract scope of work if applicable:								
	To relinquish the easement from Ordinance #407, Series of 1988								
	**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.)								
	b. Durationc. Location	1099 Osage St Council District: N/A	N/A Dist #9 M	Montero)				
7.	explain.	oversy surrounding	g this ordi	inance?	(Groups o	r individuals w	yho may have co	ncerns a	bout it?) Please
	None		To be con	npleted :	by Mayor's	Legislative Te	eam:		
SIE	RE Tracking Number					Date I	Entered:		