

ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team
at MileHighOrdinance@DenverGov.org by **3:00pm 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: June 16, 2014

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: *(Include a concise, one sentence description – please include name of company or contractor and contract control number - that clearly indicates the type of request: grant acceptance, contract execution, amendment, municipal code change, supplemental request, etc.)*

The Department of Safety is requesting an ordinance approving and providing for the execution of an agreement between the City and County of Denver and University of Colorado Health Sciences Center -Addiction Research and Treatment Services Peer I and Haven (2014-16271) for residential and non-residential community corrections services.

3. Requesting Agency:

Department of Safety

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

- **Name:** Laura Wachter or Greg Mauro
- **Phone:** 720-913-6445
- **Email:** Laura.wachter@denvergov.org greg.mauro@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:** Greg Mauro
- **Phone:** 720-913-8252
- **Email:** greg.mauro@denvergov.org

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

The Division of Community Corrections is requesting an ordinance to approve a contract with University of Colorado Health Sciences Center- ARTS Peer I and Haven in the amount of \$5,365,501.00 for residential community corrections services provided in FY14-15 which exceed the provisions contained in Section 3.2.6(E) of the Charter.

Funding for this agreement is provided through an allocation from the State of Colorado for the Community Corrections Program FY14-15.

*****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:** 2014-16271
- b. **Duration:** 7/1/2014 through 6/30/2015
- c. **Location:** n/a
- d. **Affected Council District:** All
- e. **Benefits:** To provide residential and non-residential community corrections services
- f. **Costs:** Funding is provided by the State of Colorado

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: _____

Date Entered: _____

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

We do not believe there are any issues surrounding this agreement.

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