ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team at MileHighOrdinance@DenverGov.org by NOON on Wednesday.

All fields must be completed.

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

						Date of Request: July 10, 2012		
Ple	ase marl	k one:	⊠ Bill Request	or		Resolution Request		
1.	Has your agency submitted this request in the last 12 months?							
		Yes	⊠ No					
	If y	es, please e	xplain:					
2.	Title: (Include a concise, one sentence description - 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.)							
	Winter Park Recreation Association - Third Amendatory Agreement to Supplemental Agreement No. VII							
3.	Reques	ting Agency	Parks and Recreation	'n				
4.	 4. Contact Person: (with actual knowledge of proposed ordinance) Name: Fred Weiss Phone: 720-913-0735 Email: fred.weiss@denvergov.org 							
5.	availabi ■ Na: ■ Pho	<i>le for first ar</i> me: Fred W one: 720-91	with actual knowledge on the second reading, if now we will be second reading, if now we will be second reading, if now we will be second reading. The second reading with the second reading with the second reading	e <u>ecessary</u>) as 741		vergov.org		
6.	Genera	l descriptio	n of proposed ordinaı	nce including	g cont	tract scope of work if applicable:		
	k Resort.					afer and rental fees upon the sale of development property at Winter respect to the basis and authority to collect such fees which this		
		nclude the f						
		Duration:	_	e the duration	n cont	tained in Supplemental Agreement No. VII		
	b.	Location:	Winter Park Resort Council District: No					
	c.	Benefits:			for th	ne continue operation of the Winter Park Recreation Association.		
	d. e.	Costs: N		ures funding	; 101 tii	ie continue operation of the winter rank Recreation Association.		
7.	explain	-		is ordinance	e? (gro	oups or individuals who may have concerns about it?) Please		
			То	be completed	d by M	Mayor's Legislative Team:		
SIRE Tracking Number:					Date:			