

ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by 9 a.m. Friday. Contact the Mayor's Legislative team with questions

Date of Request: 10/23/2024

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: to Revoke an Encroachment Permit

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 the request for an Ordinance to revoke Ordinance No. #980, Series of 1995 which granted a revocable permit to St. Joseph's Hospital, their successors and assigns, to encroach into the right-of-way with an Underground Private Sanitary Sewer at 1835 North Franklin Street.

3. **Requesting Agency:** DOTI, Right-of-Way Services (-ROWS), Engineering & Regulatory

4. Contact Person:

Contact person with knowledge of proposed ordinance/resolution (e.g., subject matter expert)	Contact person for council members or mayor-council
Name: Vanessa West	Name: Nicholas Williams
Email: Vanessa.west@denvergov.org	Email: Nicholas.Williams@denvergov.org

5. **General description or background of proposed request. Attach executive summary if more space needed:**
(who, what, why)

Request for an Ordinance to revoke Ordinance No. #980, Series of 1995, which granted a revocable permit to St. Joseph's Hospital, their successors and assigns, to encroach into the right-of-way with an Underground Private Sanitary Sewer at 1835 North Franklin Street.

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

7. **City Council District:** District # 9 - Councilperson Watson

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 (including any dba's):

Contract control number (legacy and new):

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: _____