

**ORDINANCE/RESOLUTION REQUEST**

Please email requests to the Mayor’s Legislative Team

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

Date of Request: 05/25/2018

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.)

Request to amend 14-137, D.R.M.C to conform with state law on the non-refundable processing fee of twenty-five dollars if court-appointed counsel enters an appearance.

**3. Requesting Agency:** Office of the Municipal Public Defender

**4. Contact Person:**

Contact person with knowledge of proposed ordinance/resolution	Contact person to present item at Mayor-Council and Council
Name: Alice Norman	Name:
Email: <a href="mailto:Alice.Norman@denvergov.org">Alice.Norman@denvergov.org</a>	Email:

**5. General description or background of proposed request. Attach executive summary if more space needed:** current ordinance does not conform with state law, which has caused confusion and disparate outcomes. The proposed amendment would still allow for the fee to be imposed by the Judge but at sentencing or final disposition when appropriate.

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

**7. City Council District:**

**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:*

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