## ORDINANCE/RESOLUTION REQUEST

Please email requests to Nancy Kuhn 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 Request: _	March 19, 2014
Ple	ease mark one:	Bill Request	or	Resolu	ıtion Request		
1.	Has your agency s	submitted this request	in the last 1	2 months?			
	☐ Yes	⊠ No					
	If yes, please	explain:					
2.	<b>Title:</b> (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 an Ordinance to relinquish the easements established in Ordinance No. 347, Series of 1974, (alley), and Ordinance No. 319, Series of 1963, (Birch St).						
3.	Requesting Agence	ey: Public Works Surve	y				
4.	■ Name: Bever Phone: 720-8			l ordinance/res	solution.)		
5.	<ul><li>will be available for</li><li>Name: Nanc</li><li>Phone: 720-8</li></ul>		ng, if necess		olution <u>who will p</u>	present the item at Mo	ayor-Council and who
6.	General description	on of proposed ordinan	ce includin	g contract sco	ope of work if ap	plicable:	
		linquish the ease to relin , Series of 1963, (Birch					
	**Please complete enter N/A for that f	the following fields: (In field.)	ncomplete fi	elds may resul	t in a delay in pro	ocessing. If a field is	not applicable, please
		Control Number: N/	A				
	<ul><li>b. Duration</li><li>c. Location:</li></ul>		ont and Bir	ch St			
				ary Beth Susm	an		
	e. Benefits: f. Costs: N	N/A					
7.	Is there any contrexplain.	oversy surrounding thi	is ordinance	e? (Groups or	individuals who i	nay have concerns al	bout it?) Please
	None						
		To	be completed	d by Mayor's I	Legislative Team:		
SIF	RE Tracking Number	r:			Date Ente	red:	