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: February 8, 20
Please mark one:	X Bill Request	or	☐ Resolution	Request
1. Has your agency s	ubmitted this request i	n the last 12	2 months?	
☐ Yes	X No			
If yes, please e	xplain:			
	tes the type of request: ¿			e of company or contractor and contract control number cution, amendment, municipal code change,
Amendment to way.	the Official Zoning Ma	p to correct	a scrivener's error	related to the zoning designation of various rights-of-
3. Requesting Agency	y: Community Planning	g & Develop	oment and City Atto	orney's Office
Name: Tina APhone: 720-8		of proposed	ordinance/resoluti	ion.)
will be available for Name: Tina A Phone: 720-8	<i>r first and second readir</i> Axelrad			on who will present the item at Mayor-Council and wh
6. General description	n of proposed ordinan	ce including	g contract scope o	of work if applicable:
** Please complete enter N/A for that fi		acomplete fie	elds may result in a	a delay in processing. If a field is not applicable, pleas
a. Contract	Control Number: n/a	l		
b. Duration:c. Location:abutting 360 South Mon	4 locations: (1) ROW			d, (2) ROW abutting 200-290 Columbine, (3) ROW
	Council District: CD	Districts 10	0 and 8	
e. Benefits:	n/a			
f. Costs: n				
Is there any contro explain.	oversy surrounding thi	s ordinance	e? (Groups or indiv	viduals who may have concerns about it?) Please
No.				
	To l	be completed	d by Mayor's Legis	lative Team:

SIRE Tracking Number:

Date Entered: