

BILL/ RESOLUTION REQUEST

- 1. Title:** Concerning eligibility for medical marijuana business licensing for certain businesses where changes in ownership or location occur between July 1, 2010 and July 1, 2012.
- 2. Requesting Agency:** City Council
- 3. Contact Person *with actual knowledge of proposed ordinance***
 - Name:**Shelley Smith
 - Phone:**720-865-9316
 - Email:**
- 4. Contact Person *with actual knowledge of proposed ordinance who will present the item at Mayor Council and who will be available for first and second reading, if necessary***
 - Name:**
 - Phone:**
 - Email:**
- 5. Describe the proposed ordinance, including what the proposed ordinance is intended to accomplish, who's involved**
 - a. Scope of Work**

Increases flexibility for changes in ownership or location for certain existing medical marijuana businesses during the moratorium on new businesses prior to implementation of the new state/local dual licensing system.
 - b. Duration**
 - c. Location**
 - d. Affected Council District**

all
 - e. Benefits**
 - f. Costs**
- 6. Is there any controversy surrounding this ordinance, groups or individuals who may have concerns about it? Please explain.**

Bill Request Number: BR11-0645

Date: 8/31/2011