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:	09/06/12		
Please mark one:		Bill Request	or	☐ Resolu	tion Request				
1.	Has your agency s	submitted this request in	the last 1	2 months?					
	☐ Yes	⊠ No							
	If yes, please	explain:							
2.		oncise, one sentence desc ates the type of request: g est, etc.)							
	(Urban Center	one the property located a Neighborhood Context, on the height) with a condition condition.	Cherry Cree	ek North) to C-	-MX-5 (Urban	Center Neighborhood	Context, Mixed Use, 5		
	62, Harman's Scondition: Plot	ion: Parcel "A" Proposed Subdivision, City and Co 5 and the North 50 feet of ept the 181 square foot pa	unty of Der of Plot 4, B	nver, State of Colock 62, Harm	Colorado. Parce an's Subdivisio	el "B" Proposed Zonir n, City and County of	ng C-MX-5 with a		
3.	Requesting Agenc	y: Community Planning	& Develop	oment					
4.	Contact Person: (With actual knowledge of proposed ordinance/resolution.) Name: Kyle Dalton Phone: 720-865-2972 Email: kyle.dalton@denvergov.org								
5.	Contact Person: (With actual knowledge of proposed ordinance/resolution who will present the item at Mayor-Council and who will be available for first and second reading, if necessary.) Name: Kyle Dalton Phone: 720-865-2972 Email: kyle.dalton@denvergov.org								
6.	General description	on of proposed ordinanc	e including	g contract sco	pe of work if a	pplicable:			
		has been proposed by the ition would require a reg							
	** Please complete enter N/A for that f	the following fields: (Indield)	complete fie	elds may result	in a delay in p	rocessing. If a field is	s not applicable, please		
	b. Durationsc. Locationsd. Affected 6e. Benefitsf. Costs: N	200 Columbine St., 2 Council District: 10 N/A N/A	34 Columb						
7.	Is there any contreexplain.	oversy surrounding this	ordinance	e? (Groups or t	individuals who	may have concerns a	bout it?) Please		
		To b	e completed	d by Mayor's L	egislative Tean	ı:			
SII	RE Tracking Number				Date Ent	ered:			

racking Number:			Date	Entered:			
	To be completed by Mayor's Legislative Team:						
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