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: June 6, 2013
Ple	ase mark one: Bill Request or Resolution Request
1.	Has your agency submitted this request in the last 12 months?
	☐ Yes
	If yes, please explain:
2.	Title: (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.)
	Official Zone Map Amendment request to rezone property located at 1300 S. Sheridan Boulevard from PUD 511 to E-MX-3
3.	Requesting Agency: Community Planning and Development
4.	Contact Person: (With actual knowledge of proposed ordinance/resolution.) Name: Sarah Showalter Phone: 720-865-2923 Email: sarah.showalter@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: Sarah Showalter Phone: 720-865-2923 Email: sarah.showalter@denvergov.org
6.	General description of proposed ordinance including contract scope of work if applicable: **Please complete the following fields: (Incomplete fields may result in a delay in processing. If a field is not applicable, please enter N/A for that field.)
	Official Zone Map Amendment request to rezone property located at 1300 S. Sheridan Boulevard from PUD 511 to E-MX-3
	 a. Contract Control Number: NA b. Duration: NA c. Location: 1300 South Sheridan Boulevard d. Affected Council District: Council District #3 e. Benefits: NA f. Costs: NA
7.	Is there any controversy surrounding this ordinance? (Groups or individuals who may have concerns about it?) Please explain.
	No comments have been received from the public.
	To be completed by Mayor's Legislative Team:
SIE	E Tracking Number: Date Entered: