

ORDINANCE/RESOLUTION REQUEST

Please email requests to Angela Casias at
Angela.Casias@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: 1/14/2015

Please mark one: **Bill Request** or **Resolution Request**

1. **Has your agency submitted this request in the last 12 months?**

Yes **No**

If yes, please explain:

2. **Title:** *(Include a concise, one sentence description – please include name of company or contractor and contract control number - that clearly indicates the type of request: grant acceptance, contract execution, amendment, municipal code change, supplemental request, etc.)*

**Contract Amendment – Time Only
2013 On-Call Structural & Safety Repairs Phase 1
Hallmark, Inc.**

3. **Requesting Agency:** Public Works – City Engineering

4. **Contact Person:** *(With actual knowledge of proposed ordinance/resolution.)*

- **Name:** Diane Urbina
- **Phone:** 720.913.1763
- **Email:** diane.urbina@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:** Mike Lopez
- **Phone:** 720.913.4511
- **Email:** Michael.lopez@denvergov.org

6. **General description of proposed ordinance including contract scope of work if applicable:**

To extend the contract 6 months. This is just a contract extension, no funding changes.

***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.)*

- a. **Contract Control Number:** 201309355
- b. **Duration:** Original term was 4/17/13 – 4/16/15, this amendment takes it through 10/16/2015.
- c. **Location:** Various
- d. **Affected Council District:** Citywide
- e. **Benefits:**
- f. **Costs:** \$0.00

7. **Is there any controversy surrounding this ordinance? (Groups or individuals who may have concerns about it?) Please explain.**

None

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: _____

Date Entered: _____