ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team at MileHighOrdinance@DenverGov.org by NOON on Wednesday.

All fields must be completed.
Incomplete request forms will be returned to sender which may cause a delay in processing.

							Date of Reque	est: August 18, 2010	
Please mark one:		⊠ Bill Request	or		Resolution Request				
1.	Has your agency submitted this request in the last 12 months?								
	☐ Ye	s	⊠ No						
	If yes,	please ex	plain:						
2.	Title: (Include a one sentence description that clearly indicates the type of request – grant acceptance, contract execution, municipal code change, supplemental request, etc.)								
Au	Ordinance to approve the sale of City owned property, adjacent to the intersection of 10 th and Osage, to the Denver Housing Authority								
3. Requesting Agency: Office of Economic Development									
4.	 4. Contact Person: (with actual knowledge of proposed ordinance) Name: Jeff Romine Phone: 720-913-1526 Email: Jeff.Romine@DenverGov.org 								
5.	 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: Seneca Holmes Phone: 720-913-1533 Email: Seneca.Holmes@DenverGov.org 								
6. General description of proposed ordinance including contract scope of work if applicable:									
low	he Denver H v-income sen	ousing Ai	athority at an apprais ag tower. The proceed	ed price of \$1 ds from this sa	512.9 sale v	northwest corner parcel of 97 per sq ft, or \$897,225. will be returned to OED's nd County of Denver.	This parcel will be the fur	ture site of a 100 unit	
Please include the following:									
	b. Lo c. Af d. Be		10 th and Osage (ac ouncil District: # creation of 100 un	9		th and Osage Light Rail s	Station)		
7.	Is there any explain. No.	y controv	versy surrounding tl	nis ordinance	e? (g	groups or individuals who	may have concerns abou	nt it?) Please	
			To	be completed	d by	Mayor's Legislative Tear	n:		
SIRE Tracking Number:						Date:			
Ordinance Request Number:						Date:			

Date: _____