

## ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team  
at [MileHighOrdinance@DenverGov.org](mailto: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: March 26, 2013

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.)* Rezoning of 2121 Children's Museum Drive from OS-A to C-MX-5

3. **Requesting Agency:** Community Planning and Development

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

- **Name:** David Gaspers
- **Phone:** 720-865-2936
- **Email:** [david.gaspers@denvergov.org](mailto:david.gaspers@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:** Same as above
- **Phone:**
- **Email:**

6. **General description of proposed ordinance including contract scope of work if applicable:** Rezoning from OS-A to C-MX-5

**\*\*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:**
- b. **Duration:**
- c. **Location:** 2121 Children's Museum Drive
- d. **Affected Council District:** Dist 1
- e. **Benefits:** Expansion of Children's Museum
- f. **Costs:**

7. **Is there any controversy surrounding this ordinance?** *(Groups or individuals who may have concerns about it?)* **Please explain.** No

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*To be completed by Mayor's Legislative Team:*

SIRE Tracking Number: \_\_\_\_\_

Date Entered: \_\_\_\_\_