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: February, 12, 201
Ple	ease mark one:	X Bill Request or ☐ Resolution Request
1.	Has your agei	ncy submitted this request in the last 12 months?
	☐ Yes	X No
	If yes, ple	ase explain:
2.		e a concise, one sentence description – please include <u>name of company or contractor</u> and <u>contract control number</u> ndicates the type of request: grant acceptance, contract execution, amendment, municipal code change, request, etc.)
	This is a requ	est to approve a contract with Kone Inc. Contract number: GENRL-201414653-00
3.	Requesting A	gency: Purchasing
4.	Name: JoPhone: 72	on: (With actual knowledge of proposed ordinance/resolution.) e Saporito 20-913-8118 seph.saporito@denvergov.org
5.	will be availabName: JoPhone: 72	on: (With actual knowledge of proposed ordinance/resolution who will present the item at Mayor-Council and who le for first and second reading, if necessary.) e Saporito 20-913-8118 seph.saporito@denvergov.org
6.	**Please comp enter N/A for t The Purc elevators,	ription of proposed ordinance including contract scope of work if applicable: blete the following fields: (Incomplete fields may result in a delay in processing. If a field is not applicable, please that field.) hasing Dept. conducted a solicitation for the purposes of preventative maintenance and repair services on Cit escalators, wheelchair lifts, platform lifts and dumbwaiters. Kone is the awarded vendor and the Purchasing uests approval of the governing contract that resulted from the solicitation.
	b. Dura c. Loca d. Affec e. Bene	ract Control Number: GENRL-201414653-00 tion: 5 Years tion: Multiple City Facilities ted Council District: N/A fits: N/A s: \$2,000,000
7.	Is there any coexplain.	ontroversy surrounding this ordinance? (Groups or individuals who may have concerns about it?) Please
		To be completed by Mayor's Legislative Team:
SIRE Tracking Number:		mber: Date Entered: