

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: 3/6/13

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.)*

Official Map Amendment Application #2012I-00047, 13000 E. Albrook from B-4 w/wvrs, UO-1 and UO-2 to S-MX-2

3. **Requesting Agency:** CPD

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

- **Name:** Deirdre Oss
- **Phone:** 720-865-2950
- **Email:** deirdre.oss@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:** Deirdre Oss
- **Phone:** 720-865-2950
- **Email:** deirdre.oss@denvergov.org

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

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***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:** N/A
- b. **Duration:** N/A
- c. **Location:** 13000 E. Albrook
- d. **Affected Council District:** 11
- e. **Benefits:** Allow update to the Denver Zoning Code, use for current vacant parcel
- f. **Costs:** N/A

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

No controversy to date.

To be completed by Mayor’s Legislative Team:

SIRE Tracking Number: _____

Date Entered: _____