

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: **April 13, 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:** Request for approval of contract, pursuant to Charter § 3.2.6(E), with Vision Service Plan Insurance Company for employee vision insurance benefits.

3. **Requesting Agency:** Office of Human Resources

4. **Contact Person:** *(with actual knowledge of proposed ordinance)*

- **Name:** Jennifer Cahoon
- **Phone:** 720-913-5521
- **Email:** Jennifer.cahoon@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:** Jennifer Cahoon
- **Phone:** 720-913-5521
- **Email:** Jennifer.cahoon@denvergov.org

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

Agreement for Vision Service Plan Insurance Company to provide vision insurance in 2015 to employees eligible pursuant to section 18-171 of the DRMC, and classified members of the police departments, contract amount not to exceed \$504,000.00. Contract ID#CSAHR-2015-0028

Please include the following:

- a. **Duration:**
- b. **Location:**
- c. **Affected Council District:**
- d. **Benefits:**
- e. **Costs:**

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

None known