

ORDINANCE/RESOLUTION REQUEST

Please email requests to Jason Gallardo
at Jason.Gallardo@DenverGov.org by **12:00 pm 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 6, 2023

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:** This request is to dedicate four City-owned parcels of land as 1) E. 9th Ave., located at the intersection of E. 9th Ave. and N. Cherry St., 2) E. 9th Ave., located at the intersection of E. 9th Ave. and N. Dexter St., 3) N. Dexter St., located at the intersection of N. Dexter St. and E. 9th Ave., and 4) N. Dexter St., located near the intersection of N. Dexter St. and E. 9th Ave.

3. **Requesting Agency:** DOTI, Right-of-Way Services
Agency Section: Survey

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

- **Name:** Lisa R. Ayala
- **Phone:** 720-865-3112
- **Email:** lisa.ayala@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:** Jason Gallardo
- **Phone:** 720-865-8723
- **Email:** Jason.Gallardo@denvergov.org

6. **General description/background of proposed resolution including contract scope of work if applicable:** Proposing to build a new medical office building at 4600 E. 9th Ave. The developer was asked to dedicate four parcels as 1) E. 9th Ave., 2) E. 9th Ave., 3) N. Dexter St., and 4) N. Dexter St.

****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 – please do not leave blank.)

- a. **Contract Control Number:** N/A
- b. **Contract Term:** N/A
- c. **Location:** Located at the intersections of E. 9th Ave., N. Cherry St., and N. Dexter St.
- d. **Affected Council District:** Amanda Sawyer District # 5
- e. **Benefits:** N/A
- f. **Contract Amount (indicate amended amount and new contract total):** N/A

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

None.

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: _____

Date Entered: _____