

ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by **11 a.m. Friday**. Contact the Mayor's Legislative team with questions

Date of Request: 5/2/2024

Please mark one: Bill Request or Resolution Request

1. Type of Request:

- Contract/Grant Agreement Intergovernmental Agreement (IGA) Rezoning/Text Amendment
 Dedication/Vacation Appropriation/Supplemental DRMC Change
 Other:

2. Title: (Start with *approves*, *amends*, *dedicates*, etc., include name of company or contractor and indicate the type of request: grant acceptance, contract execution, contract amendment, municipal code change, supplemental request, etc.)

Approves a map amendment to rezone property from CMP-H, UO-3 to C-MX-12, located at 1055 Clermont Street in Council District 5.

3. Requesting Agency:

Community Planning and Development (CPD)

4. Contact Person:

Contact person with knowledge of proposed ordinance/resolution (e.g., subject matter expert)	Contact person for council members or mayor-council
Name: Jason Morrison	Name: Jason Morrison
Email: Jason.Morrison@denvergov.org	Email: Jason.Morrison@denvergov.org

5. General description or background of proposed request. Attach executive summary if more space needed:

This rezoning application proposes to rezone approximately four acres of the iconic 13-acre former Veterans Administration Hospital (VA) campus in the Hale statistical neighborhood.

- Application was noticed on 3/12/2024
- Planning Board Public Hearing was noticed on 4/16/2024
- Recommendation of approval from Planning Board (7-0) on 5/1/2024
- No public comment; no controversy
- Applicant has met with Council District 5 (10/24/2023 and 1/4/20204) and various RNOs in the area prior to rezoning and during the previous Large Development Review (LDR) process.

6. City Attorney assigned to this request (if applicable):

Nathan Lucero

7. City Council District: 5

8. ****For all contracts, fill out and submit accompanying Key Contract Terms worksheet****

To be completed by Mayor's Legislative Team:

Resolution/Bill Number: _____

Date Entered: _____

Key Contract Terms

Type of Contract: (e.g. Professional Services > \$500K; IGA/Grant Agreement, Sale or Lease of Real Property):

Vendor/Contractor Name (including any dba's):

Contract control number (legacy and new):

Location:

Is this a new contract? Yes No Is this an Amendment? Yes No If yes, how many? _____

Contract Term/Duration (for amended contracts, include existing term dates and amended dates):

Contract Amount (indicate existing amount, amended amount and new contract total):

<i>Current Contract Amount</i> (A)	<i>Additional Funds</i> (B)	<i>Total Contract Amount</i> (A+B)
<i>Current Contract Term</i>	<i>Added Time</i>	<i>New Ending Date</i>

Scope of work:

Was this contractor selected by competitive process?

If not, why not?

Has this contractor provided these services to the City before? Yes No

Source of funds:

Is this contract subject to: W/MBE DBE SBE XO101 ACDBE N/A

WBE/MBE/DBE commitments (construction, design, Airport concession contracts):

Who are the subcontractors to this contract?

To be completed by Mayor's Legislative Team:

Resolution/Bill Number: _____

Date Entered: _____