ORDINANCE/RESOLUTION REQUEST

Please email requests to Angela Casias at

Angela.casias@denvergov.org by NOON 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: December 22, 2017
Please mark one:		Bill Request	or		Resolution Reques	st
1. Has your agency submitted this request in the last 12 months?						
	☐ Yes	⊠ No				
	If yes, please e	explain:				
2.	Title: (Include a concise, one sentence description – please include <u>name of company or contractor</u> and <u>contract control number</u> - that clearly indicates the type of request: grant acceptance, contract execution, amendment, municipal code change, supplemental request, etc.)					
	Request for an Ordinance to connect to City wastewater facilities adjacent to Council District 3.					
	915 South Sheridan Boulevard, Lakewood, CO 80226					
	2017-SUDP-0004597					
3.	Requesting Agency	y: Public Works DES				
4.	 Contact Person: (With actual knowledge of proposed ordinance/resolution.) Name: Jim Turner Phone: 720-865-3033 Email: Jim.Turner@denvergov.org 					
 6. 	 will be available for Name: Angel Phone: 720-9 Email: angela 	<u>r first and second readin</u> a Casias	g, if necess	sary.))	will present the item at Mayor-Council and who if applicable:
	This is a property outside of the limits of the City that needs to connect to City wastewater facilities, which requires an Ordinance.					
	**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.)					
		Control Number: N/A	A			
	b. Duration: Permanent					
	c. Location: 915 South Sheridan Boulevard, Lakewood, CO 80226					
	d. Affected Council District: Council District 3e. Benefits: N/A					
	f. Costs: N					
7.	Is there any controversy surrounding this ordinance? (Groups or individuals who may have concerns about it?) Please explain.					
	None					
	1.010					
		To b	e complete	d by	Mayor's Legislative T	eam:
SIF	RE Tracking Number	:			Date	Entered: