ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by 3:00pm on Monday. For any questions please contact Skye Stuart.

All fields must be completed.

Incomplete request forms will be returned to sender which may cause a delay in processing.

						Date of Request: 8 /24/201	<u>5</u>
Ple	ease mark one:	X Bill Request	or		Resolution Reque	est	
1.	Has your agency s	ubmitted this request i	n the last 1	12 mont	hs?		
	☐ Yes	X No					
	If yes, please e	xplain:					
2.		tes the type of request: §				npany or contractor and contract control numbe, , contract amendment, municipal code change,	
	Official Maj	p Amendment App	lication #	#2014I	-00033		
3.	Requesting Agency	y: CPD					
4.	Contact Person: Name: Tim W Phone: 720-86 Email: tim.wa						
5.	will be available forName: Tim WPhone: 720-86	<i>r first and second readin</i> Vatkins			ce/resolution <u>who</u>	will present the item at Mayor-Council and who	-
6.	General descriptio	n/background of prop	osed ordin	ance inc	cluding contract s	cope of work if applicable:	
Re	ezoning request fro	om U-SU-A to U-MS-	-2x				
		f ollowing fields: (Incom _j - please do not leave bla		may res	ult in a delay in pr	rocessing. If a field is not applicable, please	
		Control Number: N/A					
	b. Contract of Location:	Term: N/A 3268 W. 32 nd Ave					
		Council District: 1					
	e. Benefits: Avenue (cl	Infill development of				orce the neighborhood character along 32 nd et), and to improve the transition to nearby single	;
	f. Contract	Amount (indicate amer	nded amou	ınt and ı	new contract total	1):	
7.	Is there any contro	oversy surrounding thi	s ordinanc	ee? (Gro	ups or individuals	who may have concerns about it?) Please	<u>ber</u> ge,
	medical office	development project. The	he West Hi	ighlands	Neighborhood Ass	ort for the rezoning proposal and the intended sociation submitted a letter of opposition that they feel the best way to move forward is a	
		To t	pe complete	ed by Ma	yor's Legislative T	Feam:	_

SIRE Tracking Number:

Date Entered:

To be completed by Mayor's Legislative Team:	