ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by 3:00pm on Monday. Contact the Mayor's Legislative team with questions

Please mark one: Bill Request or	☐ Resolution Request	Date of Request: 5/1/19
1. Type of Request:		
☐ Contract/Grant Agreement ☐ Intergovernmental A	Agreement (IGA) Rezoning/Text A	amendment
☐ Dedication/Vacation ☐ Appropriation/Suppl	lemental DRMC Change	
Other:		
2. Title: (Start with approves, amends, dedicates, etc., includ acceptance, contract execution, contract amendment, mur Change the zoning classification for 5231, 5301-5307, 5335 L from PUD 627 and B-3 Waivers and Conditions to E-CC-3	nicipal code change, supplemental reques	t, etc.)
3. Requesting Agency: Community Planning and Develop	oment	
4. Contact Person: Contact person with knowledge of proposed ordinance/resolution	Contact person to present item at N	Mayor-Council and
Name: Elizabeth Weigle	Name: Elizabeth Weigle	
Email: elizabeth.weigle@denvergov.org	Email: elizabeth.weigle@denvergov.org	
 5. General description or background of proposed requestions. Change the zoning classification for 5231, 5301-5307, 5335 L from PUD 627 and B-3 Waivers and Conditions to E-CC-3 6. City Attorney assigned to this request (if applicable): 1 	Leetsdale Drive & 420, 450 S. Grape Stre	
7. City Council District: 5		
8. **For all contracts, fill out and submit accompanying	Key Contract Terms worksheet**	
•	by Mayor's Legislative Team:	
Resolution/Bill Number: BR19 0446	Date Entered:	

Key Contract Terms

Type of Contract: (e.g. Professional Services > \$500K; IGA/Grant Agreement, Sale or Lease of Real Property):				
Vendor/Cont	ractor Name:			
Contract control number:				
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 <u>existing</u> term dates and <u>amended</u> dates):				
Contract Amount (indicate existing amount, amended amount and new contract total):				
	Current Contract Amount (A)	Additional Funds (B)	Total Contract Amount (A+B)	
	Current Contract Term	Added Time	New Ending Date	
Scope of work:				
Was this contractor selected by competitive process? If not, why not?				
Has this contractor provided these services to the City before? \square Yes \square 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	e completed by Mayor's Legislative Tean	ı:	

Resolution/Bill Number: BR19 0446

Date Entered: