ORDINANCE/RESOLUTION REQUEST

Please email requests to Jason Gallardo

at <u>Jason.Gallardo@denvergov.org</u> by **12:00pm on <u>Monday</u>**. Contact him with questions.

	Date of Request: May 5, 2020				
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.) Request for revocation of Ordinance No. 306, Series of 2005 which granted a revocable permit to Center for Traditional Chinese Medicine, their successors and assigns, to encroach into the right of way with a handicap ramp at 5 Cook Street.					
3. Requesting Agency: Department of Transportation and Infrastructure, Engineering and Regulatory					
4. Contact Person:					
Contact person with knowledge of proposed ordinance/resolution	Contact person to present item at Mayor-Council and Council				
Name: Brianne White	Name: Jason Gallardo				
Email: Brianne.white@denvergov.org	Email: Jason.Gallardo@denvergov.org				
 5. General description or background of proposed request. Attach executive summary if more space needed: Request for revocation of Ordinance No. 306, Series of 2005 which granted a revocable permit to Center for Traditional Chinese Medicine, their successors and assigns, to encroach into the right of way with a handicap ramp at 5 Cook Street. The ADA ramp is not being removed. We are revoking the Tier III Resolution because according to the Rules and Regulations for Encroachments in the ROW from 2014, the ramp was deemed a Tier I now. With that being said, in 2014 up to today, we have allowed people to revoke these since they are not Tier III's any longer. 6. City Attorney assigned to this request (if applicable): Martin Plate 					
 7. City Council District: Councilman Hinds, District 10 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 Cont	ract: (e.g. Professional Services >	> \$500K; IGA/Grant Agreement, Sale	or Lease of Real Property):
Vendor/Cont	ractor Name:		
Contract con	trol number:		
Location:			
Is this a new	contract?	chis an Amendment? Yes No	If yes, how many?
Contract Ter	m/Duration (for amended contra	acts, include <u>existing</u> term dates and <u>an</u>	nended dates):
Contract Am	ount (indicate existing amount, a	mended amount and new contract tota	ıl):
	Current Contract Amount	Additional Funds	Total Contract Amount
	(A)	(B)	(A+B)
	Current Contract Term	Added Time	New Ending Date
Scope of worl	k:		
Was this cont	ractor selected by competitive p	rocess? If not, w	thy not?
Has this contr	ractor provided these services to	the City before? Yes No	
Source of fun	ds:		
Is this contrac	ct subject to: W/MBE	DBE SBE XO101 ACDI	BE N/A
	To be	e completed by Mayor's Legislative Tean	1:
Resolution/Bil	ll Number:	Date Ent	ered:

WBE/MBE/DBE commitments (construction, design, Airport concession contracts):				
Who are the subcontractors to this c	ontract?			
	To be completed by Mayor's Legist			
Resolution/Bill Number:		Date Entered:		