

---

# *Council Newsletter*

---



## **CITY MANAGER'S NOTES February 24, 2011**

### **Upcoming Council Meetings**

City Council will meet on **Monday, February 28, 2011**. The Study Session will begin at 6:00 p.m. in the Community Room. There is no Regular Meeting scheduled. The agenda is included. Sandwiches will be available at 5:30 p.m. in the City Council Conference Room.

The next City Council meeting will be **Monday, March 7, 2011**.

### **Informative Memoranda**

The following are memoranda in response to City Council's requests, as well as other informational items.

1. Article from *Nation* concerning marijuana from Council Member Olson.
2. Memorandum concerning the Project Update.
3. Calendar of Events.
4. Tentative Study Session Topics.
5. Minutes from the Malley Center Trust fund Committee meeting of October 20, 2010.
6. Minutes from the Water and Sewer Board meetings of January 11 and February 9, 2011.
7. Minutes from the Planning and Zoning Commission meeting of February 8, 2011.

NATION

# Don't call it pot; it's "medicine" now. Dealers are caregivers, and buyers are patients... How Marijuana Got Mainstreamed

BY ANDREW FERGUSON/  
COLORADO SPRINGS

I'VE ALWAYS BEEN PASSIONATE ABOUT food," says Jenelise Robinson. "And I've always been passionate about marijuana and the things it can do for the world."

The Denver woman is 35 but looks 20, with heavy loop earrings distending her lobes and an enormous bracelet to match. From her clavicles southward, her body is a riot of tattoos—the usual skulls and anchors as well as a large circle with a squiggle inside it on her right arm. (When a visitor points quizzically to the squiggle, she replies politely, "It's a baby in a brain," though the tone of her voice says, "Like, duh.") We shouldn't be misled by the biker look or the faux-'60s talk of changing the world. Robinson is all business—a consummate tradeswoman. In the past 16 months she has found a way to combine her passions for food and pot and make the combination pay, as founder, owner and head baker of Nancy B's Edible

This bud's for you. A prime cut of the famed Pineapple Express variety

The stem is the only non-consumable part of the bud

Photographs by Jeff Riedel for TIME

Medicine, one of the most successful startups in Colorado's newest "industry": medical marijuana.

Robinson's muffins and Rice Krispies squares are getting raves. "I have a very high tolerance," said one food critic in the Denver Chronicle, a medical-marijuana blog, "and a 2-dose lemon bar will put me on my ass." "I loved the buzz, which lasted 8 hours," wrote another. "Very functional and social." The growth of Robinson's business has come with the explosion in the number of Colorado's medical-marijuana dispensaries, or centers. Coloradans who are recommended by a doctor and approved by the state go to the centers to buy their pot, either in traditional bud form or as an "infused product" like Robinson's lemon bars, which are 100% organic and laced with a marijuana concentrate. Her success is reflected in the Mile High Macarons and Cannabis Cups stacked in the new commissary-style kitchen she's rented in the gentrifying neighborhood of City Park West in Denver.

Even with a decent supply of high-grade pot in her walk-in freezer, Robinson can scarcely keep up with demand. She and her two employees (a third is soon to be hired) work six days a week to refine her menu, revise recipes, taste-test hash oil and manage inventory—and still squeeze in time every day to medicate.

"For my ADD," she says. "And some shoulder pain."

Medicate? The medical-marijuana industry relies heavily on such genteel euphemisms. To medicate is to smoke pot, and no one in the industry calls pot pot anymore; it's *medicine* now. Dealers are called caregivers, and the people who buy their dope—medicine, medicine—are patients. There's no irony here, no winks or nudges to signal that someone's leg is being pulled. "After work," says a counter clerk, or budtender, at Briargate Wellness Center, an upscale dispensary serving the tony north side of Colorado Springs, "I'll just go home, kick back, take out the bong and medicate."

The euphemisms are an important element in the larger movement to bring marijuana use out from the shadows, as advocates say, so it can take its place innocently on Americans' nearly infinite menu of lifestyle preferences, from yachting to survivalism to macrobiotic cooking. So far, the strategy is working. Colorado and 13 other states, along with

## 369,634 legal marijuana users in 13 states with established programs

Source: Congressional Research Service

the District of Columbia, have legalized medical marijuana in the past 14 years. More than a dozen other states are considering the idea. Overnight, dispensaries have sprung up in hundreds of towns and cities; billboards touting one outlet's pot over its rivals' are plastered all over Los Angeles. In some parts of California—where marijuana is the biggest cash crop, with total sales of \$14 billion annually—medical pot has become such an established part of the commercial base that cities are moving toward taxing it.

It's not clear that even political setbacks discourage, much less stop, the mainstreaming of marijuana. Anti-pot forces cheered on Nov. 2 when voters in four states apparently rejected pro-pot ballot initiatives—including California's Prop 19, which would have legalized possession of an ounce (28 g) of pot or less. But by Election Day, Governor Arnold Schwarzenegger and the state legislature had already rendered Prop 19 moot. A month earlier, he signed a bill that reduced possession of up to an ounce from a misdemeanor to a civil infraction. By Jan. 1, 2011, jaywalkers may have more to fear from California cops than potheads do.

Medical marijuana has helped make all this possible. In a short time, pot has gone from being a prohibited substance to one that is, in many places, widely available if you have an ache or a pain and the patience to fuss with a few forms. This did not take place by accident. In fact, medical marijuana's emergence has many of the

attributes of a product rollout. As with any hot commodity, dope is now accorded the same awed regard in some Colorado retail establishments as fine wine, dark chocolate and artisanal cheese. Only now it takes place under the cover of medical care, wellness and pain management. And so what is emerging in many places is a strange, bipolar set of rules: dope is forbidden for everyone but totally O.K. for anyone who is willing to claim a chronic muscle spasm. Does anyone take such farcical distinctions seriously? And can a backlash be far behind?

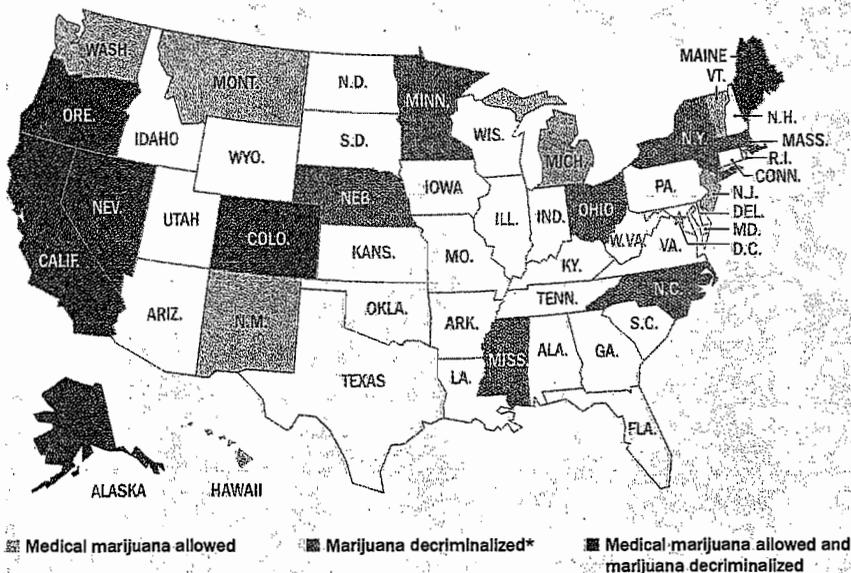
### Legalization via the Clinic Door

GEORGE SOROS, THE JILLIONAIRE CURRENCY trader and patron of countless liberal organizations, began funding pro-legalization groups in the early 1990s, with instructions that they redirect their energies toward "winnable" issues like medical marijuana. It was a savvy tactic. Even when polls showed strong resistance to making pot legal, large majorities of Americans supported making it available to patients for pain relief. "If we get medical access, we're going to get legalization eventually," activist Richard Cowan said in 1993. "The cat will be out of the bag." Colorado is a good test of whether that seemingly inexorable trajectory will remain plausible or prove a pipe dream.

Along the regulatory spectrum that stretches from distinctly mellow L.A. to schoolmarmish New Mexico, Colorado sits somewhere near the middle. In 2000, Colorado voters approved an amendment to the state constitution to legalize the possession of marijuana for patients suffering from "debilitating medical conditions": cancer, glaucoma, HIV/AIDS and multiple sclerosis, along with more nebulous symptoms like "severe nausea" and "severe pain." Voters supported Amendment 20, 54% to 46%.

The implementation was based on what is called a caregiver model. Each patient, on the recommendation of a doctor, could designate a friend or neighbor to grow up to six plants for the patient's use, and each of these caregivers could provide for no more than five patients. Both patient and caregiver would register with the state. The idea was to prevent profiteering, and from 2000 to 2007, roughly 2,000 patients signed up. "The system worked pretty well," says Don Quick, state district attorney for two counties in central Colorado. "Nobody really had a problem with it."

## Medical Exceptions. Many states are backing off the war on weed



\*Extent of decriminalization varies by state, but generally there is no incarceration for possession of a small amount—typically less than 1 oz. (28 g)—and instead a fine is imposed

Sources: Marijuana Policy Project; National Organization for Reform of Marijuana Laws; National Conference of State Legislatures

But in 2007, a pro-pot group called Sensible Colorado sued the state health department, and a state court ruled the five-patient limit unconstitutional. “That opened the floodgates,” says Brian Vicente, the group’s executive director. “A caregiver could have 50 patients if they wanted. And if you had 50 patients, why not open a shop?” Over the next two years, more than 1,000 dispensaries sprang up to serve the more than 100,000 Coloradans who had suddenly discovered their need for medicinal marijuana and applied for a patient card. As Jon Stewart noted, what had been considered the healthiest state in the country rapidly became one of the sickest.

And the economics changed overnight. Patients might spend \$500 a year growing six plants on their own. By contrast, dispensaries routinely charge \$350 to \$500 for 1 oz. of pot. With patients limited by law to possession of no more than 2 oz., they could easily drop \$5,000 a year on treatment. “A good-size dispensary will have a few hundred regular customers,” Quick says. “You can do the math.”

One who did the math was Joe DiFabio, who fits the mold of the hardy American

entrepreneur—if the hardy American entrepreneur sold pot for a living. Now in his late 20s, DiFabio ran a construction company and worked in sales before a friend suggested he open a dispensary. He is also a patient, for back pain—nearly everyone who works in the industry medicates—and he had become disenchanted with the dispensaries he’d seen: stoned budtenders, sloppy service, subpar medicine. “They just weren’t well kept up,” he says. “Kind of dirty.”

His business plan was to offer an alternative for the well-heeled professionals in northern Colorado Springs. “I wanted to have the very best medicine at the lowest prices in town,” he says, in “a safe, discreet, professional environment.” Briargate Wellness Center opened earlier this year, and the plan seems to be working. On a recent weekday afternoon, the three cars in Briargate’s parking lot were a Jaguar, a Mercedes and a BMW. DiFabio greets customers in a pressed oxford shirt, trim khakis and polished loafers. The place is painted in pale pastels, and back issues of *Golf Digest* are fanned out on a slate table. The flat-screen TV plays the A&E channel.

“It’s way more work than I expected,” he says. “Everyone thinks you get rich on the first day. I’m \$45,000 in debt.” Beyond the waiting room, the medicine sits carefully displayed on a shelf in little vials labeled with venerable names from a distant, less businesslike era: Mowie Wowie, Couchlock, Atomic Haze—more than 20 varieties in all. There are boxes of rolling papers and massed ranks of bongos and vaporizers, a recent innovation that theoretically allows the patient to inhale pot fumes without burning the weed. Pipes made of colorful blown glass have replaced the old metal pipes familiar to an earlier generation of dopers. Marijuana-infused salsa and chips—“they work phenomenally,” DiFabio says—are waiting to be washed down with a bottle of Dixie Elixir medicated soda, in your choice of grape, strawberry or orange. Lollipops are in high demand, and gummy bears fly off the shelves. DiFabio’s biggest complaints nowadays would warm the heart of a U.S. Chamber of Commerce lobbyist. “The regulations,” he says, “are just over the top.” His application for a dispensary license ran to 1,400 pages, with attachments.

Modern liberalism has always maintained a tension between its libertine and bureaucratic impulses, and in medical marijuana the contradictions collide: the government will let you get as high as you want, but only if you fill out a form first. Would-be patients must obtain a recommendation from a doctor and mail a notarized application and a check for \$90 to the state department of health. If they can prove to a budtender that they’ve applied for a card, they’re eligible to buy medicine after 35 days. The card arrives in the mail eventually; the backlog at the health department is nine months and getting longer. For dispensary owners and their suppliers—growers and infused-product makers like Robinson—the regulations seem to never end. Alarmed by the sudden efflorescence of dispensaries and customers, the Colorado legislature this summer placed the industry under the regulatory oversight of an official of the state revenue department. Though he’s a former cop who busted pot smokers in the 1980s, Matt Cook says he approaches his work with pristine disinterestedness. “The way I see it,” he says, “I regulate widgets. Whatever there is to regulate, that’s fine with me.”

Cook has prepared 92 pages of proposed regulations modeled on the rules

JEFF MEDEL FOR TIME



**The regulator** Matt Cook, an official with the Colorado state revenue department, is a former cop who busted pot smokers in the 1980s. Now he writes rules to keep the legal providers in line

that govern casinos. Dispensary-license fees now run as high as \$18,000. Bud-tenders and owners face strict residency requirements, and anyone with a felony drug conviction is barred from the industry for life. Owners will soon be required to place video cameras throughout their cultivation sites and dispensaries so regulators can log on to the Internet and trace the movement of every marijuana bud from the moment its seeds are planted to the point of sale. The video will be transmitted to a website accessible to regulators round the clock. The regulators dictate where the cameras must be placed and at what angle. DiFabio is particularly irked

by a proposal to monitor his marijuana scales by linking them to the Web. "We've paid our fees," he says. "Why do they have to watch us every second?"

Only in a state where marijuana is almost legal can you find so many Obama voters complaining about Big Government.

### High? What High?

A FEW FACTS IN PARTICULAR DROVE THE LEGISLATURE to tighten the regs this summer. Even Inspector Clouseau might have begun to suspect there was more to the industry than medicating the terminally ill. No one doubts that medical marijuana has brought

relief to the state's cancer patients, AIDS sufferers and MS victims. But these aren't the customers the industry is really serving. At the beginning of this year, Colorado health department records show that only 2% of registered patients had cancer; 1% had HIV/AIDS. There were 94% who suffered "severe pain"—a catchall condition that can be entirely subjective and difficult for a doctor to measure or verify. Statewide, more than 70% of doctor recommendations were written by fewer than 15 physicians. Three out of four patients are men under 40. This patient profile—young males complaining of chronic pain—has been roughly the same in other medical-marijuana states like Montana and California.

A couple of weekday afternoons spent at several Colorado dispensaries confirms the picture the numbers paint. Nearly all the patients were male, a large majority in their 20s and 30s. Figures from other states, though less comprehensive, match Colorado's. Brian Vicente shrugs off the numbers. Young men are more likely to work the kind of jobs that result in chronic pain, he says. "All this really shows is that pain is more prevalent in society than AIDS and cancer."

Pot affects different people differently—"We're all our own walking chemistry experiments," Robinson likes to say—and for many patients, smoking it or eating it will quickly relieve pain, nausea and muscle spasms associated with chemotherapy and MS. Studies have demonstrated beyond quibble that marijuana has some effectiveness in mitigating severe pain. Unfortunately, only clinical tests can show which of marijuana's 108 active compounds cause which of its many effects, and because the balance of compounds shifts from plant to plant, dosage is nearly impossible to control when the medicine is consumed in its botanical state.

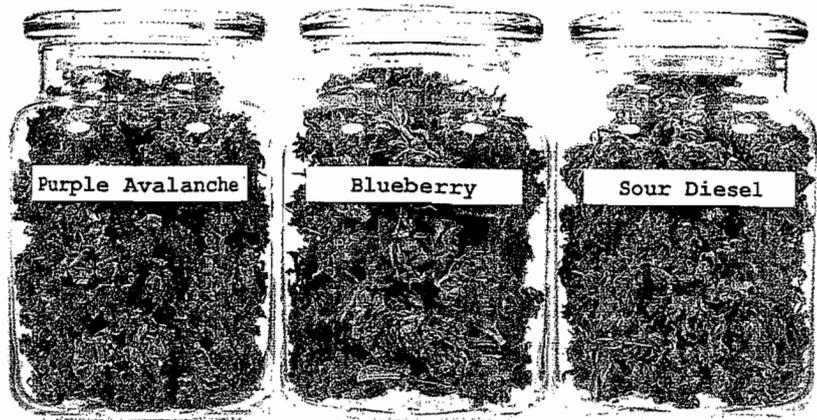
Even activists now concede that marijuana is addictive for 10% of regular users—making it less addictive than alcohol (15%) and much less addictive than cigarettes (32%), which are, they point out, perfectly legal. Marijuana unquestionably causes cognitive impairment; nobody would smoke it for fun otherwise. Loss of memory and a decline in decision-making ability are the most pronounced effects, data confirmed anecdotally and by Cheech and Chong movies. How long the impairment lasts—whether a month or a lifetime—and to what degree are open

questions. Use of marijuana has been linked clinically to the onset of depression, anxiety and schizophrenia; the link is especially strong in younger users and stronger still in young men with a predisposition to mental illness.

At the same time, budtenders and dispensary owners alike extol pot's bounteous ability to heal in language that is part *Diagnostic and Statistical Manual*, part *Whole Earth Catalog*. Forget migraines and insomnia, back pain and lack of appetite: pot is routinely sold as a cure for irritable-bowel syndrome, Tourette's, muscular dystrophy, herpes, diabetes, gonorrhea, bulimia, eczema and—oddly enough—both obesity and weight loss. Andrew Weil, the alternative-medicine doctor and holistic-healing guru, suggests marijuana might cure cancer.

And what, a layperson might impolitely ask, about the buzz? Hearing tales of pot's medicinal powers, you would think it was the last thing on anybody's mind. Budtenders will even use air quotes when they speak the word *high* to nonpatients, as though the stoner effects were an elaborate urban myth. Yet among patients, it's often hard to disentangle the curative and palliative functions of marijuana from the desire to get, if you'll forgive the expression, high. Typical are these patient testimonials from a website run by Montana Caregivers Network: the RomSpice variety, says one satisfied customer, "is the strongest body high I've ever felt. It literally makes my whole body feel numb and tingly. I give it a 12 out of 10 for pain." About AK-47, another testifies, "A more 'active' high, pretty decent munchie factor after a few minutes and a very pleasant mental haze. Pain relief is definitely also a good plus with this one." Here the recreational and medicinal are so balled up that one begins to look like an excuse for the other. Nobody would dare talk this way about Percocet.

That's what worries Christian Thurstone, a psychiatrist for adolescents who runs a drug-treatment program in Denver. He cites the confluence of two trends among the city's young. "There's an increase in the availability of marijuana," he says, "at the same time that we're seeing a decrease in the perceived harmfulness of marijuana." His program has seen a marked increase in patient referrals for marijuana use at his clinic, where all patients are under 18.



## The Science of Pot. The lore is giving way to fact—and the news is mixed

It's fairly settled science that pot has analgesic and anti-nausea properties, which is why it can be so soothing for people undergoing chemotherapy or suffering from pain. But does that mean it's harmless, or are there more-compelling reasons to steer clear of the stuff?

Smoking joints does not seem to pose as many pulmonary risks as smoking cigarettes, in part because people simply smoke fewer of them. One large study in 2006 found no increased risk of lung cancer. But a French study last year found an "independent role of cannabis in the development of lung cancers." A 2009 study in the U.K. concluded that acetaldehyde, which is present in both marijuana and tobacco smoke, can cause DNA damage "with the possibility to initiate cancer development."

The science, however, remains unsettled, and other research has reached opposite conclusions. Another U.K. study showed that the anti-inflammatory properties of cannabis may have an anticancer effect. And a 2009 study in Spain found that tetrahydrocannabinol (THC), the main intoxicating component of pot, can lead human brain-cancer cells to self-destruct—though the study involved introducing the cells into mice and treating them with THC. That's a long way from treating cancer in a human brain.

The timeless question of

whether pot makes you stupid seems easy to answer just by watching a stoner movie. Do those guys look smart to you? The science, though, is subtler than that, and the answer depends at least in part on the chemical makeup of what's in your stash. A recent British study looked at how users are affected by different ratios of THC and cannabidiol (CBD), pot's other principal intoxicant.

It's THC that's behind a pot high's otherworldly edge—and also behind the paranoia and hallucinations it can cause. It's CBD that gives the drug its sedating power. The lower the concentration of CBD relative to THC, the worse the subjects in the British study performed on word-recall tests; the higher the concentration, the better they did. Graded on the generous curve required when all the subjects were wasted, the people with the mellow buzz were generally smarter. While there is some conflicting data, most studies do not find lasting effects on cognition.

Although pot's rep for diminishing short-term memory is deserved, it surprisingly may have therapeutic value in treating Alzheimer's disease. A 2008 study in rats showed that the anti-inflammatory effect of a THC-like compound might slow the progression of the degenerative illness. The compound may also promote the growth of new cells in aging brains.

And what about addiction? Can you get hooked on pot? The answer is yes—depending on how addiction is defined. There are substance addictions and process addictions—heroin vs. sex or gambling, say—and they all target similar reward pathways in the brain. Heroin, alcohol and other substances, however, trigger violent withdrawal symptoms if the chemical is cut off, and that clearly doesn't happen with pot—to say nothing of sex and gambling. Even among experts, the existence of withdrawal symptoms used to be the key criterion defining addiction.

But that thinking has changed, and nearly everyone now goes by the broader definition of addiction in the *Diagnostic and Statistical Manual*—psychology's field guide to mental illness. The *DSM* describes addiction as compulsive use of a substance or repetition of a behavior despite repeated negative consequences. About 10% of pot users are addicts by that definition—lower than the roughly 15% to 30% of alcohol, tobacco, cocaine and heroin users who are addicts, but in the vicinity.

There may never be a final word on the health effects of pot, but if there were, it would not lie at the extremes. Somewhere between *Reefer Madness* and *Alice's Restaurant* is the truth. —BY JEFFREY KLUGER, WITH REPORTING BY MAIA SZALAVITZ

"We've started hearing things we hadn't heard before," he says. "They're telling us that marijuana isn't a drug, that it's a medicine. They even call it medicine."

To register as a medical-marijuana patient, a minor must submit the notarized signatures of both parents to the Colorado board of health. Even so, Thurstone says, when he collected data on 55 juvenile marijuana patients, he found that 60% of them had gotten their pot from a patient with a medical-marijuana card. "This age is a crucial developmental window for these teenagers, particularly young males," he says. He cites studies that suggest marijuana use in adolescence doubles the risk of schizophrenia in later life. "The human costs are potentially huge." Meanwhile, a national survey on drug use and health reports that the percentage of kids under 17 using marijuana has been rising—from 6.7% in 2008 to 7.3% last year.

### The Backlash Cometh

FOR ALL ITS SUCCESS, THERE ARE SIGNS THAT the advance of the medical-marijuana movement is not inevitable: The narrow losses for initiatives in South Dakota and, apparently, Arizona, despite lavish funding on their behalf, were discouraging to advocates, who are ordinarily quite cheerful—no surprise there—and upbeat about the prospects for their cause. The Los Angeles city council recently moved to reduce the number of local dispensaries from an estimated 1,000 to roughly 200. The New Jersey legislature passed a medical-dope law in January far more stringent than the one activists hoped for. Only terminally ill patients or those with cancer or ALS will be permitted to buy marijuana from a handful of state-sponsored clinics. New Mexico's law, passed in 2007, will prohibit the private cultivation of marijuana, which will be available only through the state government's own "cannabis-production facilities."

Meanwhile, at the federal level, it's still 1985. Marijuana retains its status as a Schedule 1 controlled substance, the legal equivalent of heroin and LSD, with "a high potential for abuse" and "no currently accepted medical use." That designation sharply limits the medical research that can be done with marijuana, setting up a flawless bureaucratic catch-22: pot is listed as Schedule 1 because science hasn't found an accepted medical use for it, but science can't find a medical use for it because it's listed as Schedule 1. Either Congress or the

## 16.7 MILLION illegal users who used marijuana at least one month before a 2009 survey

Source: 2009 National Survey on Drug Use and Health

Drug Enforcement Administration could change the designation, but the DEA shows no signs of budging, and when Representative Barney Frank introduced a bill two years ago to reclassify marijuana for medical research, he gathered all of four original co-sponsors.

The high hopes that advocates once had for the Obama Administration have faded too. During the presidential campaign, Barack Obama promised to de-emphasize federal prosecution of medical-marijuana violations, and Attorney General Eric Holder formalized the policy with a memo to U.S. Attorneys in September 2009.

But it was a short honeymoon. Last January, Obama stunned the movement by reappointing George W. Bush's DEA acting administrator, Michele Leonhardt, who has an uncompromising approach to marijuana. This year, the DEA has made a series of raids on medical-marijuana facilities in Nevada, Michigan and California, claiming the operations were simply fronts for conventional drug dealing. When a federal survey last month showed a surge in pot smoking among young people, Obama's drug czar, R. Gil Kerlikowske, was quick to finger medical-marijuana laws as the culprit. "I think all of the attention and the focus of calling marijuana medicine has sent the absolute wrong message to young people," Kerlikowske said. For the marijuana movement, the Obama era has been all hope and no change.

If nothing else, technology may make

medical marijuana obsolete. Mark A.R. Kleiman, a specialist in drug policy at UCLA, says it's inevitable that some form of measurable, dosable medical marijuana will be made available in the next few years, a medicine that comes not in plant form but in a spray or an inhaler. "And that will do away with the argument for medical marijuana as we know it," he says. Already Canada and the U.K. have approved the use of Sativex, a cannabis-based spray for the nose and mouth that was developed by GW Pharmaceuticals, and it's in late-stage testing in the U.S. Sativex has been effective for pain from MS spasms and cancer treatment without causing the marijuana high. The moment Sativex goes on the market, the need for medical dispensaries, caregivers and growers—and all the confusions and prevarications that attend them—disappears.

There's a rough justice here: the disingenuousness of the push for medical marijuana—billed as a compassionate reform and used as a tactic toward full legalization—was always its Achilles' heel. Up to now, most states have approached medical marijuana with a series of evasions. Doctors rely on a patient's report of pain to recommend it, dispensaries rely on the word of doctors to sell it, regulators rely on legislators to determine who can provide it, and legislators fall back on public opinion, which is ill suited to making careful and informed decisions about pharmacology. And no one takes direct responsibility. None dare call it legalization. There is another way to go about it.

"If we want to legalize marijuana," said Thurstone, "then let's legalize marijuana and call it a day. Let's not sneak it in the back door, dragging the medical system into it."

Here, at least, Thurstone finds an unexpected ally in Jenelise Robinson. Going through boxes of her new Puff Potion medicated soda (\$6 a bottle wholesale), she reflects on the oddity of the culture that medical marijuana has created in her state. "It seems silly, doesn't it?" she says. "If there's someone who's been smoking for a long time, medicating, and this is what they like to do and this is what works for them, then why can't they just do it? Why make them go to the doctor and register? Why force them to lie about it?" ■

Ferguson is a senior editor at the Weekly Standard. His new book *Crazy U: One Dad's Crash Course on Getting His Kid into College* will be published in March by Simon & Schuster

# MEMORANDUM



**TO:** Gary Sears, City Manager

**THROUGH:** Rick Kahm, Director of Public Works ✓

**FROM:** David Henderson, Engineering/Capital Projects Administrator ✓

**DATE:** February 24, 2011

**SUBJECT:** PROJECT UPDATES –**Concrete Utility Program 2011**, Safety Services Generator Project, City Radio System, Street Maintenance Projects 2011, CityCenter Site Development, Englewood McLellan Reservoir Foundation, Air Quality/Energy Savings Projects

---

## CONCRETE UTILITY 2011

Staff is beginning the process of rating concrete for the 2011 construction program.

## SAFETY SERVICES GENERATOR PROJECT

On February 7<sup>th</sup>, City Council approved, on first reading, a Bill for an Ordinance to accept a FEMA “Assistance to Firefighters Grant”. This grant includes the purchase and installation of a 200KW generator. The Generator project was advertised on February 7<sup>th</sup>. **Twelve contractors attended the pre-bid conference on February 17<sup>th</sup>. Bids are due on Monday, February 28<sup>th</sup> and staff expects to present a motion to award a contract at the March 7<sup>th</sup> Council meeting.**

## CITY RADIO SYSTEM-REPLACEMENT WITH PUSH TO TALK

The Servicer Garage continues to remove old radios from vehicles as they are being serviced.

## STREET MAINTENANCE PROJECTS 2011

Cracks will be poured as weather and time allow.

## CITYCENTER SITE DEVELOPMENT

### Alexan East and West Parcels

438 residential units. Alexan’s occupancy level for January, 2011 is 93.8%. Commercial uses: Mile High Coffee, Let It Bead, Curves for Women, State Farm, Cuttin’It Loose, Jackson Hewitt Tax Service, Foothills Physical Therapy, Creative Perspectives, and CityCenter Community.

### Parkway Retail / Office Buildings

Commercial uses: The International House of Pancakes (IHOP), Qdoba, GNC, Supercuts, Nails Center, CityCenter Dental Group, MMB Hearing, Tableaux Interior Design, Englewood Eyecare, Collective Licensing Int’l, Inc., M.P. Hayutin, LLC, CityCenter Wine and Spirits, Quizno’s, Miller/Weingarten, Air Walk, “Insurance Company of the West”, Printwear Express, Fred Astaire Dance Studio, Wellness Treatment Center, and SB Clark Companies.

### Bally’s Building

Tenants include Bally’s, “Blondies Fire House Pub and Restaurant”, and MaxFour.

### Retail South of the Parkway

Tenants: Petco, Ross, Payless Shoes, Coldstone Creamery, Noodles, Sports Authority, and Office Depot.

### Gold Mine Pad

Tenants include: Jamba Juice, Tokyo Joe’s, Mega Wraps, and Browncow.

### CityCenter Site

EEFI continues project management of all infrastructure on the site. Staff is monitoring the security, sweeping, snow removal, and day porter services performed under the Common Area Maintenance.

Wal Mart Expansion

**Wal Mart's contractor continued construction of a 10,488 square foot addition to the east side of the store.** The project will eliminate the tire and auto section and add square footage for groceries. The building entrance will move east to the middle of the building.

Bradley Station Environmental

EEFI's environmental consultants prepared an Executive Summary Report (dated July 28, 2008). Updates will be provided as additional information is received.

ENGLEWOOD MCLELLAN RESERVOIR FOUNDATION (EMRF)

PA-84 West

Construction for TT of Denver is temporarily on hold. EMRF continues to receive monthly draws against the deposit.

PA-85 (RTD site)

RTD paid the final billing in the amount of \$591,836.86. Finance has deposited this money in the LTAR fund.

AIR QUALITY/ENERGY SAVING PROJECTS

Flex Fuel Program

Currently, thirty-three of our fleet vehicles are running on E-85 ethanol fuel. All new replacement vehicles (less than ¾ ton) will be compatible with E-85. Approximately 50 Flex Fuel vehicles will be in our fleet within two years. Currently, the cost of E-85 fuel is approx. \$0.55 per gallon less than regular unleaded gasoline. Thirteen of our fleet vehicles run on Compressed Natural Gas (CNG).

Diesel Retrofit

Retrofitting of our diesel powered vehicles is complete. Englewood is one of three municipalities in Colorado to meet the 2007 emissions standards for off-road vehicles.

Hybrid Vehicle Purchase

The City of Englewood applied for a grant through the Regional Air Quality Commission for funding of hybrid vehicle technology. If successful, the grant will provide funding for the additional cost of the hybrid technology over the base vehicle cost. Two units that have met the replacement criteria for 2011 and will be replaced with Ford Escape hybrid vehicles. The total cost of these vehicles is within the budgeted replacement amount designated for these units, and if the grant is successful, the additional cost of the hybrid technology will be deposited back into the CERF fund.

"Green" Programs

We continue to work with our vendors to expand the Green product line as it becomes available. 90% of our custodial paper supplies are from recycled sources. Public Works is in the process of exploring Single Stream Recycling at the Servicenter facility. The Servicenter is now "single-streaming" waste at the Servicenter and a dumpster has been supplied for *cardboard only* recycling.

Energy Saving Projects

In 2001, the Public Works Traffic Division began an ongoing program to convert traffic signals from incandescent lamps to Light-Emitting-Diode (LED) bulbs. To date, 80% of our City maintained signals have been converted. LED traffic signals use 90% less energy than incandescent lamps, last 5 times longer, and provide better visibility.

**CITY OF ENGLEWOOD  
2011 CALENDAR OF EVENTS**



Mon., Feb. 28	6:00 p.m.	City Council Study Session, Community Room
Wed., Mar. 2	5:45 p.m.	Cultural Arts Commission, Council Conference Room
	7:00 p.m.	Liquor Licensing Authority, Council Chambers
Mon., Mar. 7	6:00 p.m.	City Council Study Session, Community Room
	7:30 p.m.	City Council Meeting, Council Chambers
Tues., Mar. 8	5:00 p.m.	Water and Sewer Board, Comm. Dev. Conf. Room
	6:30 p.m.	Keep Englewood Beautiful Comm., City Council Conf. Rm.
	7:00 p.m.	Library Board, Library Board Room
	7:00 p.m.	Planning & Zoning Commission, Council Chambers
Wed., Mar. 9	6:30 p.m.	Urban Renewal Authority, CD Conference Room
	7:00 p.m.	Board of Adjustment and Appeals, Council Chambers
Thurs. Mar. 10	11:30 a.m.	Alliance for Commerce in Englewood Committee, City Council Conference Room
	5:30 p.m.	Parks & Recreation Commission, Englewood Service Center, 2800 South Platte River Drive
	6:30 p.m.	Transportation Advisory Committee, City Council Conf. Rm.
Mon., Mar. 14	6:00 p.m.	City Council Study Session, Community Room
Wed., Mar. 16	6:30 p.m.	Code Enforcement Advisory Committee Meeting, Council Conference Room
	7:00 p.m.	Liquor Licensing Authority, Council Chambers
Mon., Mar. 21	6:00 p.m.	City Council Study Session, Community Room
	7:30 p.m.	City Council Meeting, Council Chambers
Tues., Mar. 22	7:00 p.m.	Planning & Zoning Commission, Council Chambers
Mon., Mar. 28	6:00 p.m.	City Council Study Session, Community Room

Mon., Apr. 4	6:00 p.m.	City Council Study Session, Community Room
	7:30 p.m.	City Council Meeting, City Council Chambers
Tues., Apr. 5	7:00 p.m.	Planning & Zoning Commission, City Council Chambers
Wed., Apr. 6	4:00 p.m.	Englewood Housing Authority, 3460 S. Sherman #203, Board Room
	5:45 p.m.	Cultural Arts Commission, City Council Conference Room
	7:00 p.m.	Liquor Licensing Authority, City Council Chambers
Mon., Apr. 11	6:00 p.m.	City Council Study Session, Community Room
Tues., Apr. 12	5:00 p.m.	Water and Sewer Board, Community Development Conference Room
	6:30 p.m.	Keep Englewood Beautiful Commission, City Council Conference Room
	7:00 p.m.	Library Board, Library Board Room
Wed, Apr. 13	6:30 p.m.	Urban Renewal Authority, Community Development Conference Room
	7:00 p.m.	Board of Adjustment and Appeals, City Council Chambers
Thurs. Apr. 14	11:30 a.m.	Alliance for Commerce in Englewood Committee, City Council Conference Room
	5:30 p.m.	Parks & Recreation Commission, Broken Tee Englewood Golf Course, 2101 West Oxford Avenue
Mon., Apr. 18	6:00 p.m.	City Council Study Session, Community Room
	7:30 p.m.	City Council Meeting, City Council Chambers
Tues., Apr. 19	7:00 p.m.	Planning & Zoning Commission, City Council Chambers
Wed., Apr. 20	7:00 p.m.	Liquor Licensing Authority, City Council Chambers
Mon., Apr. 25	6:00 p.m.	City Council Study Session, Community Room
Mon., May 2	6:00 p.m.	City Council Study Session, Community Room
	7:30 p.m.	City Council Meeting, City Council Chambers
Tues., May 3	7:00 p.m.	Planning & Zoning Commission, City Council Chambers
Wed., May 4	4:00 p.m.	Englewood Housing Authority, 3460 S. Sherman #203, Board Room

**TENTATIVE**  
**STUDY SESSIONS TOPICS**  
**FOR ENGLEWOOD CITY COUNCIL**



March 7	Study Session & Regular Meeting Police Chief Selection Process BID Summer Event & Other Special Events
March 14	Study Session Cancelled - NLC Conf. in Washington D.C.
March 21	Study Session & Regular Meeting Financial Report
March 28	Study Session RTD
April 4	Study Session & Regular Meeting
April 11	Study Session
April 18	Study Session & Regular Meeting Financial Report
April 25	Study Session
May 2	Study Session & Regular Meeting Discussion of Board/Commission Reappointments Oracle R-12 Update – tentative
May 9	Study Session Citizen of the Year Celebration – Malley Center
May 16	Study Session & Regular Meeting Financial Report
May 23	Study Session
May 30	No Meeting Scheduled – Memorial Day Holiday
June 6	Study Session & Regular Meeting
June 13	Study Session Board and Commission Interviews

June 20	Study Session & Regular Meeting Financial Report
June 27	Study Session
July 5	Study Session & Regular Meeting – Tuesday
July 11	Study Session
July 18	Study Session & Regular Meeting Financial Report & 6 Month Budget Review
July 25	Study Session
August 1	Study Session & Regular Meeting
August 8	Study Session Board and Commission Appreciation Night @ Pirates Cove
August 15	Study Session & Regular Meeting Financial Report
August 22	Study Session
August 29	No Meeting Scheduled – 5 <sup>th</sup> Monday
September 6	Study Session & Regular Meeting – Tuesday

### **FUTURE STUDY SESSION TOPICS**

Historic Preservation  
 Unrelated Persons per Household  
 Inclusive Cities  
 BID Liaison  
 Informing Citizens  
 PLACE Discussion  
 EMS Billing Policy  
 Sign Code  
 Civility  
 ACE role in business initiatives  
 Water Court cases  
 Fire Academy Orphan Property



MALLEY CENTER  
TRUST FUND COMMITTEE MEETING  
Minutes  
Oct. 20, 2010

Meeting called to order at 4:00pm in the Eldorado Room by Selwyn Hewitt, Chairperson.

**ATTENDANCE:**

**TRUST FUND BOARD MEMBERS PRESENT:**

Selwyn Hewitt Chairperson, Opal Doane, Austin Gomes, Marty Mosman and Jim Woodward.

**MALLEY STAFF PRESENT:**

Jerrell Black Director of Parks and Recreation, Joe Sack Facility/Program Supervisor and Shelly Fritz Recording Secretary.

**EXECUSED OR ABSENT FOR MEETING/SCHEDULED GUEST/UNSCHEDULED GUESTS:**

None

**APPROVAL OF MINUTES:**

Minutes approved as emailed/mailed to Trust Fund members. Motion by Austin Gomes, seconded by Opal Doane. Motion carried. Minutes approved unanimously.

**REPORTS:**

Trust Fund as of 10/19/2010      YTD donations \$1,388.37      Interest credited to fund \$3,328.24  
Expenditure (\$1,230.00) *Acoustic Paneling in Ballroom*      Balance \$290,919.03

**EXPANSION OF MALLEY CENTER OPEN HOURS:**

Jim Woodward stated that the 2011 budget has been approved with the Expansion of Malley hours included. Jerrell Black wanted to recognize Jim Woodward's effort and support with this new project in the budget process. An additional asset for this new project to be passed was the willingness of the Trust Fund to fund half of the cost and to evaluate annually. The Advisory Committee is ecstatic with the process and outcome.

**MALLEY ADVISORY COMMITTEE LUNCHEON:**

Normally the Advisory Committee has a luncheon in January for incoming new committee members. This year they have decided to do things differently. They will be holding a luncheon this year in November and will be inviting City Council members and Trust Fund members to attend. Then they would like the trust Fund Chair to attend the meeting following the luncheon to discuss the Trust Fund. Staff will make a chronological history of the Trust Fund as part of the presentation.

**PARKS AND RECREATION UPDATE:**

Through the budget process the following items were discussed/approved/eliminated:

- Extended hours for Malley approved.
  - Concert Series will continue with the help of EEA
  - Rec Zone after school hours will be eliminated, however, Friday nights will continue.
  - Rec Zone Friday Nights will be free for the rest of the year to see if the cost is driving the numbers lower.
  - Fun Fest was eliminated; however, Gary Hultberg is trying to get a sponsor so that we can continue this program.
  - Summer Drama program is back under the Parks and Recreation department.
  - Kid Stage will continue as usual with the help of Englewood Arts.
- Duncan Park
- All Souls is still using the school until further notice all parties have agreed.

- In December we will know if we were successful in getting the Great Outdoors Grant. If we were successful, planning will start in January to start demolishing the building.
- Applying for two other grants from Arapahoe County Open space to help with the connection of the Mary Carter Greenway and allow for planning for the old Riverside Miniature golf course.
- Awarded the Tri County Health grant. New community gardens will be coming at Charles Hay and Clayton Elementary schools. This is in cooperation with the school district, DUG, Tri county and Parks and Recreation.
- Malley was chosen as the winner of the Pinnacle Award for 2011. Joe will be flying to California in November to accept the award and then sometime early in 2011 the son of NuStep will be delivering the new piece of equipment. This award is a National award. This means that they will use us in all of their marketing. Also, staff will attend a City Council meeting sometime in the next two months to present the award.

CHAIRMAN CHOICE/ TRUSTEE CHOICE:

None

ADJOURNMENT:

There being no further business, meeting adjourned at 5:08p.m.

\_\_\_\_\_  
/sfp/

Shelly Fritz-Pelle, Recording Secretary

WATER AND SEWER BOARD  
MINUTES

January 11, 2011

The meeting was called to order at 5:04 p.m.

Members present: Cassidy, Wiggins, Woodward, Olson  
Habenicht, Higday, McCaslin, Clark, Burns

Members absent: None

Also present: Stewart Fonda, Director of Utilities

1. MINUTES OF THE NOVEMBER 9, 2010 MEETING.

The Englewood Water and Sewer Board received the minutes of the November 9, 2010 meeting.

Mr. McCaslin noted that a question of proper procedure had been introduced by Mr. Cassidy. Discussion ensued regarding whether there were procedural irregularities concerning the hearing regarding Mr. Brandse's enforcement action and fine from discharging FOG (fat, oil, grease) into the sanitary sewer system. Mr. Cassidy voiced his concerns that proper procedure was not followed under the quasi judicial hearing section of the City Code Section 1-10-2-7. The issue was researched by the City Attorney's office and a legal opinion was rendered that the hearing was proper under the Englewood Municipal Code Section 12-2-6c under *Appeal Procedure and Order*.

Mr. Habenicht moved;

Mr. Burns seconded: To approve the minutes of the November 9,  
2010 Water Board meeting.

Ayes: Cassidy, Wiggins, Woodward, Olson,  
Habenicht, McCaslin, Clark, Burns

Nays: Higday

Absent: None

Motion carried.

Mr. Burns entered at 5:10 p.m.

## 2. JEFF SHOEMAKER – GREENWAY FOUNDATION.

Mr. Jeff Shoemaker and Mr. David Howlett appeared before the Board to request funding for a study to develop an understanding of the nature and magnitude of the trash problem on the South Platte River within the Denver metro area. PURE (Protect our Urban River Environment) is an ad hoc group of business leaders and non-profits, including the Greenway Foundation.

PURE is looking for a metro-wide solution for a zero-trash-tolerance river. The program would launch a community outreach program to prevent, reduce and propose solutions to reduce trash in the South Platte River. Howlett noted that Denver will be contributing \$15,000, the City of Sheridan \$1,000 and the City of Littleton is considering their request. PURE is asking Englewood to contribute \$10,000.

Mr. Shoemaker asked the Board to reflect on the proposal and noted the amount of effort produced will depend on what the budget allows. Mr. Burns asked if the request for funds needs to be approved by Council. Stu will check on the appropriate avenue for the request. The Board agreed to discuss the request at a future meeting.

## 3. SHARED PRIVATE SEWER SERVICE LINE AT YALE & PENNSYLVANIA.

It has recently come to the attention of the Utilities Department that three adjacent properties located at 460 E. Yale Ave., 2701 S. Pennsylvania St. and 2725 S. Pennsylvania St., share a private sewer service main which connects to a Metro Wastewater District manhole.

The sewer service arrangement is in violation of Englewood Municipal Code 12-2-4A. It is the Utilities staff recommendation that, because requiring separate taps would be difficult and could create a financial hardship for the homeowners, the homeowners be allowed to keep the existing sewer main arrangement. The Utilities Department wants to

ensure that the existing homeowners are aware of the system and its drawbacks. A notice will be recorded with Arapahoe County advising prospective buyers of the sewer line arrangement. Metro Wastewater District was notified of the situation. They will accept the existing situation and view Englewood as being responsible for the outcome.

John Krauklis, owner of 2701 S. Pennsylvania St. was present, along with Tim Huston, Manager of RNR Enterprises, who videoed and inspected the private sewer main. Mr. Huston discussed areas of the pipe he found in need of repair. Mr. Fonda reiterated that the connected homeowners are responsible for all problems and repairs on the private sewer system. Stu noted the variance will remain in effect unless owners show a lack of responsibility in maintaining the system.

Mr. Burns moved;

Mr. Cassidy seconded:

To approve the variance for a private sewer main for the residences connected at 460 E. Yale Ave., 2701 S. Pennsylvania St. and 2725 S. Pennsylvania St. A notice of this arrangement will be recorded against the titles of the connected properties.

Ayes:

Cassidy, Wiggins, Woodward, Olson, Habenicht, McCaslin, Clark, Burns, Higday

Nays:

None

Absent:

None

Motion carried.

#### 4. DISTRICT COURT RULLING ON THE CITY DITCH AT OXFORD & HURON.

The Board received a copy of the, "Order Regarding Plaintiff's Motion for Preliminary Injection from Arapahoe County." The Court ruled that the Plaintiff did not establish the requirements for issuance of an injunction and denied the request to stop the City from piping the City Ditch along the 4100 block of South Huron Street. The Court mandated, "This is the only relief requested in this case and with the denial of the request the case is dismissed."

5. WASTEWATER COLLECTION SYSTEM MAINTENANCE AGREEMENT.

The proposed Wastewater System Maintenance Agreement states that Englewood will provide wastewater collection system maintenance in a designated sanitation district in exchange for an annual fee. Routine maintenance charges shall be divided among the customers in each sewer service area and will be included in their annual sewer billing. Englewood also responds to requests to locate sewer mains in their collection system.

Customers in the sanitation districts shall have additional fees added to their existing wastewater treatment bills to cover the cost of providing this maintenance service. The amount added for normal, routine flushing and maintenance services shall be at the same rate that Englewood charges for normal, routine flushing and cleaning within the Englewood Wastewater Collection area. The cost of non-routine repairs shall be charged directly to and paid by the sanitation district as a separate item.

Mr. Woodward recommended that, where noted, the “City,” “Englewood” and “City of Englewood,” be made as a consistent reference.

Woodward moved;

Mr. Habenicht seconded: To approve the Wastewater Collection System Maintenance Agreement, as amended.

Ayes: Cassidy, Wiggins, Woodward, Olson, Habenicht, McCaslin, Clark, Burns, Higday

Nays: None

Absent: None

Motion carried.

6. GREENWOOD VILLAGE SANITATION DISTRICT WASTEWATER CONNECTOR’S AGREEMENT.

Sanitary sewer service is provided to districts outside of the Englewood corporate boundaries through the standard connector’s agreement. The Littleton/Englewood Wastewater Treatment Plant is able to receive and treat sewage transmitted by various districts.

In the Greenwood Village Sanitation District there are 424 taps. The Greenwood Village Sanitation District will continue to own the lines and be responsible for capital improvements in its system. The City Attorney's office has reviewed and approved the standard Connector's Agreement.

Mr. Cassidy moved;

Mr. Burns seconded: To recommend Council approval of the Greenwood Village Sanitation District Wastewater Connector's Agreement.

Ayes: Cassidy, Wiggins, Woodward, Olson, Habenicht, McCaslin, Clark, Burns, Higday

Nays: None

Absent: None

Motion carried.

7. SOUTH ARAPAHOE SANITATION DISTRICT WASTEWATER CONNECTOR'S AGREEMENT.

Sanitary sewer service is provided to districts outside of the Englewood corporate boundaries through the standard Connector's Agreement. The Littleton/Englewood Wastewater Treatment Plant is able to receive and treat sewage transmitted by various districts.

In the South Arapahoe Sanitation District there are 9,750 taps. The South Arapahoe Sanitation District will continue to own the lines and will be responsible for capital improvements in its system. The City Attorney's office has reviewed and approved the standard Connector's Agreement.

Mr. Cassidy moved;

Mr. Burns seconded: To recommend Council approval of the South Arapahoe Sanitation District Wastewater Connector's Agreement.

Ayes: Cassidy, Wiggins, Woodward, Olson, Habenicht, McCaslin, Clark, Burns, Higday

Nays: None

Absent: None

Motion carried.

8. WATER RIGHTS UPDATE FROM DAVID HILL DATED NOVEMBER 5, 2010.

The Board received an update from Mr. David Hill dated November 5, 2010 on developments in water litigation cases in which Englewood is involved.

Stu read an e-mail from David Hill, Englewood's water attorney, dated January 4, 2011 notifying Englewood that the Water Court Judge dismissed the complaint filed by Aurora, Thornton and Metro seeking to eliminate Thornton's obligation to make its return flows at the present Metro Plant, and to eliminate all decrees stating a point of wastewater treatment. Dismissal was based primarily on Englewood's motion to dismiss. Aurora and Thornton may refile as a water court application.

9. THE MARKS – FURMAN WATER QUALITY COMPLAINT.

The Board received a memo dated December 3, 2010 regarding Jerry Furman's water quality complaint. Samples were taken and sent to the Denver Water Department lab and the Allen Plant for bacteriological testing. The lab tests came back from both indicating the water to be safe, meeting all State and Federal standards.

10. UTILITY SERVICE PROGRAM – SERVICE LINE WARRANTIES.

Utility Service Partners (USP) offers a warranty program to provide utility service line warranties to homeowners. The Board received a packet of information about the company and services provided. USP is supported by the National League of Cities and is asking to use the Englewood logo on their promotional material. The Board received a memo from John Bock dated January 6, 2011 outlining concerns about the proposed arrangement. The Board will discuss this request at a future meeting.

The meeting adjourned at 6:35 p.m.

The next Englewood Water Board meeting will be February 9, 2011 in the Public Works Conference Room.

Respectfully submitted,

/s/ Cathy Burrage  
Recording Secretary

WATER AND SEWER BOARD  
MINUTES

February 9, 2011

The meeting was called to order at 5:10 p.m.

Members present: Cassidy, Wiggins, Woodward, Habenicht,  
McCaslin,

Members absent: Olson, Higday, Clark, Burns

Also present: Stewart Fonda, Director of Utilities  
Dwayne Tinsley, Southgate Sanitation  
District

1. MINUTES OF THE JANUARY 11, 2011 MEETING.

The Englewood Water and Sewer Board received the minutes of the January 11, 2011 meeting.

Mr. Habenicht moved;

Mr. Wiggins seconded: To approve the minutes of the January 11,  
2011 meeting.

Ayes: Cassidy, Wiggins, Woodward, Habenicht,  
McCaslin

Nays: None

Absent: Olson, Higday, Clark, Burns

Motion carried.

2. GUEST: DWAYNE TINSLEY – SOUTHGATE SANITATION DISTRICT.

Mr. Tinsley distributed a history of the Big Dry Creek Interceptor and a map of projects and how they were prioritized. The Big Dry Creek Basin Interceptor is a major trunk line serving the Southgate, South Arapahoe, Greenwood Village, South Englewood Sanitation District and part of the City of Englewood for sanitary sewer transport. In 1990 the City of Englewood entered into the Interceptor Basin Agreement with the connected sanitation districts. Englewood still owns the interceptor, but all the connected districts share responsibility for the repairs, maintenance and replacement of the line.

Mr. Tinsley reviewed the restructured financing for the Big Dry Creek Interceptor implemented in 2006. The restructuring scheduled periodic increases in the Big Dry Creek Interceptor Agreement line charge. Mr. Tinsley discussed the proposed line charge which will increase the rate from \$0.159123 to \$0.189861 per 1,000 gallons of winter water consumption. This will average out to approximately \$3.00 per household, per year.

Mr. Wiggins moved;

Mr. Habenicht seconded:	To recommend Council approval, by Ordinance, of a Big Dry Creek Interceptor maintenance fee increase to \$0.189861 per thousand gallons.
-------------------------	--

Ayes:	Cassidy, Wiggins, Woodward, Habenicht, McCaslin
-------	---

Nays:	None
-------	------

Absent:	Olson, Higday, Clark, Burns
---------	-----------------------------

Motion carried.

3. REQUEST FOR FUNDS FROM PURE/GREENWAY FOUNDATION.

The Board discussed the request from Jeff Shoemaker for the PURE Project to study trash that pollutes the South Platte River. Discussion ensued about the subject of the study, the amount requested and, if a contribution was made, what fund should be used.

Mr. Wiggins moved;

Mr. Cassidy seconded: To table a motion regarding the PURE request for funding. The issue will be discussed at a future meeting to allow absent Water Board members to vote on this issue.

Ayes: Cassidy, Wiggins, Woodward, Habenicht, McCaslin

Nays: None

Absent: Olson, Higday, Clark, Burns

Motion carried.

#### 4. UTILITY SERVICE PARTNERS – SERVICE LINE INSURANCE.

Mr. Woodward distributed a sample letter used by Utility Service Partners (USP) in conjunction with a municipality, to illustrate how a participating cities' logo would be used in their promotions. Conditions discussed at the January 11, 2011 Water Board meeting would be implemented to emphasize to residents that the Utilities Department would not be responsible for USP's services. Any resulting transactions would be between the company and the customer. Mr. Woodward suggested that instead of proposed royalty payments, the monthly rates could be reduced for Englewood customers.

It was noted that their company is endorsed by the National League of Cities. Mr. Woodward recommended that the request be considered by City Council in a study session.

Habenicht moved;

Mr. Cassidy seconded: To recommend that the request by Utility Service Partners, Inc. to use the City of Englewood logo for promoting their water and sewer service line warranty insurance be forwarded to City Council for a study session.

Ayes: Cassidy, Wiggins, Woodward, Habenicht, McCaslin

Nays: None

Absent:

Olson, Higday, Clark, Burns

Motion carried.

5. WATER RIGHTS UPDATE FROM DAVID HILL DATED 1-10-11.

The Board received an update from Mr. David Hill dated January 10, 2011 on developments in water litigation cases in which Englewood is involved.

6. UV DISINFECTION AT THE LITTLETON/ENGLEWOOD WWTP.

Mr. Fonda noted that the City of Littleton voted to hire an independent engineering firm to review the Brown and Caldwell proposal recommending UV disinfection as an alternative disinfection method to comply with recently proposed ammonia limits.

The long-range advantages of an UV disinfection system were reviewed. Mr. Woodward noted that the UV issue was a last-minute agenda item from Littleton, and recommended that future agenda items have an earlier deadline to allow members to review materials.

7. WATER RATE COMPARISON.

The Board received a Water Rate Comparison chart as an approximate guide of water rates in the Denver metro area. It was noted that Englewood ranked fifth from the lowest out of twenty-two.

The meeting adjourned at 6:21 p.m.

The next Englewood Water Board meeting will be March 8, 2011 in the Public Works Conference Room.

Respectfully submitted,

/s/ Cathy Burrage  
Recording Secretary

**CITY OF ENGLEWOOD PLANNING AND ZONING COMMISSION  
REGULAR MEETING  
February 8, 2011**

**I. CALL TO ORDER**



The regular meeting of the City Planning and Zoning Commission was called to order at 7:03 p.m. in the City Council Conference Room of the Englewood Civic Center, Chair Knoth presiding.

Present: Bleile, King, Knoth, Fish, Brick, Calonder

Absent: Roth, Welker, Krieger, Kinton

Staff: Alan White, Community Development Director  
John Voboril, Planner  
Nancy Reid, Assistant City Attorney

**II. APPROVAL OF MINUTES**

January 19, 2011



Brick moved:

King seconded: TO APPROVE THE JANUARY 19, 2011 MINUTES

Chair Knoth asked if there were any modifications or corrections.

There were none.

AYES: Knoth, King, Brick, Calonder

NAYS: None

ABSTAIN: Fish, Bleile

ABSENT: Roth, Welker, Krieger

Motion carried.

**III. STUDY SESSION**



Medical District Phase II

Mr. Voboril provided information regarding the changes for Sub-area 2 that City Council made to the Downtown and Medical District Small Area Plan goals and objectives. Council opted to strike the 3400 block of Grant Street as an area of change and add language specifying that Planning Commission consider R-1 or R-2 zoning for the 3200 block of Sherman Street and the 3200, 3300 and 3400 blocks of Grant Street.

At this time Mr. Voboril began a PowerPoint presentation. He provided some options for the Commission to consider for Sub-area 2. Discussion ensued throughout the presentation. Director White distributed a copy of the amendments that the Commission originally proposed to City Council. Mr. Bleile said the job of the Planning and Zoning Commission is not just to say what is best today, but hopefully what is best for in the future; it's called planning. City Council has a different objective because they are being held accountable to what the citizens in that area want. He said there are two different core missions; ultimately it is the Council's decision.

Mr. Voboril next discussed the current existing land uses that are allowed in Sub-area 3. The area is zoned MU-R-3-B. The Commission suggested several additions and removals to the list. He reviewed the definition for clinic, hospital, laboratory (dental, medical, optical), and massage therapy facility. Stakeholders in this area wanted to see height and size restrictions.

Office Type 1 and Office Type 2 definitions and potential changes were presented. Square footage and height restrictions were discussed.

Staff will consider the Commission's comments and continue the presentation at the next Planning and Zoning Commission meeting on Wednesday, February 23<sup>rd</sup>.

#### **IV. PUBLIC FORUM**



Mr. Matthew Machetta, Mr. Gerald Tindall and Mr. Robert Regan spoke. Two students from University of Denver as well as Council Member McCaslin and Mayor Pro Tem Wilson observed.

#### **V. DIRECTOR'S CHOICE**



Director White stated the school Superintendant would like to speak to the Commission regarding the upcoming bond issue. He will be scheduled for a future meeting.

Mr. Voboril reviewed the time frame for the Medical District Phase II issue.

#### **VI. STAFF'S CHOICE**



Director White said the Medical District Phase II discussion will continue at the February 23<sup>rd</sup> meeting and election of officers will also be held that night.

#### **VII. ATTORNEY'S CHOICE**



Ms. Reid noted she would not be available to attend the February 23<sup>rd</sup> meeting.

**VIII. COMMISSIONER'S CHOICE**



The Commissioners had nothing further to report.

The meeting adjourned at 8:35 p.m.

---

Barbara Krecklow, Recording Secretary