

Street Light Application - Submit application to StreetLightingRequests@denvergov.org

Requestor Information					
Requestors Full Name:		Date:			
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A 1.1					
Address:	Street Address	Apartment/Unit #			
	Denver, Colorado	· ·			
		7/0.0 /			
	.City, State				
Phone:	.Email				
City Council	District				
City Council	District:				
	Minimum Criteria and Special Conditio	ns (Must meet one or more)			
	Minimum Officina and Opeolar Condition	is (must meet one of more)			
• Minim	um Fligibility Doguiroments				
• WIIIIIII	nimum Eligibility Requirements: ☐ Lack of a mid-block, mid-alley, intersection or large gaps between lights				
	☐ Light must be directed at the Street or Alley and not private property				
	☐ If necessary, be willing to provide Xcel Energy an Easement as well as a notarized				
	Community Planning and Development's Power of Attorney for a Zoning Permit for the				
	distribution line (power to the street light and/or if the light must be located partially on				
	private property)	5 1 7			
• Special Conditions:					
-	☐ If the block is longer than normal; abnormal shaped alley; gaps in street lighting				
	☐ Department of Safety crime statistics show a need for additional lighting				
	☐ Department of Transportation & Infrastructure deems lighting necessary when there are				
	special, extenuating circumstances identified through professional judgement and/or in				
	conjunction with approved request by the City Traffic Engineer				
Remova	l of a Street Light : Minimum Criteria and Spo	ecial Conditions (Must meet one or more)			
350.0					
• Minim	num Eligibility Requirements:				
С.	100% approval of the property owners within	n the Lighting Zone			
• Special Conditions:					
	☐ Department of Transportation & Infrastructure deems removal is necessary when there are special, extenuating circumstances identified through professional judgement and/or in				
	conjunction with approved request by the City				
	conjunction with approved request by the City	Taille Diigilieei			

Proposed Street Light Location

Please sketch proposed location of street light (List cross streets or attach a Google Map)

For Internal Use Only					
Name of Reviewer:					
Date of Initial Request://	Initial Conta	ct Name:			
Application sent via Mail or e-mail:					
Date of Lighting Zone Notification Letters:/					
Address 1:		_Zip Code	_: E-mail		
Date of Comment:/	☐ Approve ☐ Deny	/ Other:			
Address 2:		_Zip Code	_: E-mail		
Date of Comment://	☐ Approve ☐ Deny	Other:			
Address 3:	 	_Zip Code	_: E-mail		
Date of Comment://	☐ Approve ☐ Deny	Other:			
Address 4:	 	_Zip Code	_: E-mail		
Date of Comment://	☐ Approve ☐ Deny	Other:			
Address 5:		_Zip Code	: E-mail		
Date of Comment://	☐ Approve ☐ Deny	Other:			
Address 6:		_Zip Code	: E-mail		
Date of Comment://	☐ Approve ☐ Deny	Other:			
Reviewer Recommendation:					
□ Approve					
□ Deny					
Date of Notification to Requestor://					