LEGISLATIVE FACT SHEET

DATE:	04/05/22	BT or RC No:
		(Administration & City Council Bills)
SPONSOR:	Jacksonville Hous	sing Finance Authority
		(Department/Division/Agency/Council Member)
Contact for a	all inquiries and present	ations
Provide Nan	ne:	Thomas Daly
Co	ntact Number:	255-8204
Em	nail Address:	tdaly@coj.net
Research will cor (Minimum of This resolution Revenue Bond \$21,725,000 fo persons of low,	mplete this form for Council intro 350 words - Maximum of would approve the issuance s (Lofts of San Marco East A r the purpose of financing the middle, or moderate income	ation is necessary? Provide; Who, What, When, Where, How and the Impact.) Council duced legislation and the Administration is responsible for all other legislation. In page.) by the Jacksonville Housing Finance Authority of its Multi-Family Housing partments), Series 2022, in an aggregate principal amount not to exceed a Acquisition and Construction of a multifamily rental housing development for an interest of Jacksonville, Florida. To units of affordable housing and would be located at 3036 and 3314 Philips

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APPROPRIATION: Total Ar List the source name and pro	mount Appropriated: 0 ovide Object and Subobject Numbers fo	as follows: or each category listed below:
(Name of Fund as it will appear in ti	•	
	From:	Amount:
Name of Federal Funding Source(s)	То:	Amount:
	From:	Amount:
Name of State Funding Source(s):	To:	Amount:
		, unounc
Name of City of Jacksonville Funding Source(s):	From:	Amount:
.,	То:	Amount:
Name of In-Kind Contribution(s):	From:	Amount:
	То:	Amount:
Name & Number of Bond	From:	Amount:
Account(s):	То:	Amount:
	?? Will there be an ongoing maintenance? ar cipated post-construction operation costs. 1 page.)	id Stalling Obligation: Fel Chapters
	struction the 172 units of affordable housing and	d would belocated at 3036 and 3314

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ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

ACTION ITEMS: Yes Emergency?	No X	Justification of Emergency: If yes, explanation must include detailed nature of emergency.
Federal or State	· <u> </u>	Explanation: If yes, explanation must include detailed nature of mandate
Mandate?	X	including Statute or Provision.
	·	
Fiscal Year Carryover?	Х	Note: If yes, note must include explanation of all-year subfund carryover language.
Contract / Agreement	X	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment. Attachment & Explanation: If yes, attach the Contract / Agreement and name
Contract / Agreement Approval?	Х	of Department (and contact name) that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed / drafted?
Related RC/BT?	Х	Attachment: If yes, attach appropriate RC/BT form(s). Code Reference: If yes, identify code section(s) in box below and provide
Waiver of Code?	X	detailed explanation (including impacts) within white paper.
Code Exception?	X	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.
Related Enacted Ordinances?	X	Code Reference: If yes, identify related code section(s) and ordinance reference number in the box below and provide detailed explanation and any changes necessary within white paper.

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ACTION ITEMS CONTINUED: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

ACTION ITEMS: Yes Continuation of Grant?	No X	Explanation: How will the funds be used? Does the funding require a match? Is the funding for a specific time frame and/or multi-year? If multi-year, note year of grant? Are there long-term implications for the General Fund?
Surplus Property		
Certification?	Х	Attachment: If yes, attach appropriate form(s).
Reporting Requirements?	Х	Explanation: List agencies (including City Council / Auditor) to receive reports and frequency of reports, including when reports are due. Provide Department
		(include contact name and telephone number) responsible for generating
Division Chief: /S: Thon	nas J	Daly Date: 7/19/202
		(signature)
Prepared By:		Date:
		(signature)

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ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Jasmine Jordan, Budget Office, St. James Suite 325
Thru:	
	(Name, Job Title, Department)
	Phone: E-mail:
From:	
	Initiating Department Representative (Name, Job Title, Department)
	Phone: E-mail:
Primary	
Contact:	(Name, Job Title, Department)
	Phone: E-mail:
CC:	Rachel Zimmer, Director of Intergovernmental Affairs, Office of the Mayor
	904-255-5006 E-mail: <u>RachelZ@coj.net</u>
COUN	CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
To:	Peggy Sidman, Office of General Counsel, St. James Suite 480
	Phone: 904-630-4647 E-mail: psidman@coj.net
From:	Jacksonville Housing Finance Authority
	Initiating Council Member / Independent Agency / Constitutional Officer
	Phone: 255-8204 E-mail: <u>tdaly@coj.net</u>
Primary	Thomas Daly, Chief of HCDD
Contact:	
	Phone: 255-8204 E-mail: <u>tdaly@coj.net</u>
CC:	Rachel Zimmer, Director of Intergovernmental Affairs, Office of the Mayor
	904-255-5006 E-mail: <u>RachelZ@coj.net</u>
I egislati	on from Independent Agencies requires a resolution from the Independent Agency Board
•	g the legislation.
Independ	dent Agency Action Item: Yes No
	Boards Action / Resolution? X Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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