

# LEGISLATIVE FACT SHEET

DATE: 04/03/20

BT or RC No: \_\_\_\_\_  
(Administration & City Council Bills)

SPONSOR: Public Works / Mowing and Landscape Maintenance Division  
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation: Dave McDaniel

Provide Name: Dave McDaniel

Contact Number: 255-4301

Email Address: mcdaniel@coj.net

PURPOSE: White Paper (Explain Why this legislation is necessary? Provide; Who, What, When, Where, How and the Impact.) Council Research will complete this form for Council introduced legislation and the Administration is responsible for all other legislation. (Minimum of 350 words - Maximum of 1 page.)

The Mowing and Landscape Maintenance Division of the Public Works Department requests authorization to appropriate \$1,000,000 for Level 3 Tree Planting projects within the City of Jacksonville. The Level 3 Tree Planting Program allows entities to propose a tree planting project on public property that would be funded by the Tree Protection and Related Expenses Trust Fund and which would be designed, coordinated, purchased, installed and guaranteed by an entity other than the City.

APPROPRIATION: Total Amount Appropriated \$1,000,000.00 as follows:  
List the source name and provide Object and Subobject Numbers for each category listed below:

(Name of Fund as it will appear in title of legislation)

Name of Federal Funding Source(s)	From: _____	Amount: _____
	To: _____	Amount: _____

Name of State Funding Source(s):	From: _____	Amount: _____
	To: _____	Amount: _____

Name of City of Jacksonville Fundin	From: <u>Tree Protection &amp; Related Expenses</u>	Amount: <u>\$1,000,000.00</u>
	To: <u>Level 3 Tree Planting Program</u>	Amount: <u>\$1,000,000.00</u>

Name of In-Kind Contribution(s):	From: _____	Amount: _____
	To: _____	Amount: _____

Name & Number of Bond Account(s):	From: _____	Amount: _____
	To: _____	Amount: _____

**PLAIN LANGUAGE OF APPROPRIATION / FINANCIAL IMPACT / OTHER:**

Explain: Where are the funds coming from, going to, how will the funds be used? Does the funding require a match? Is the funding for a specific time frame? Will there be an ongoing maintenance? ... and staffing obligation? Per Chapters 122 & 106 regarding funding of anticipated post-construction operation costs.

(Minimum of 350 words - Maximum of 1 page.)

This BT is to appropriate funds from the portion of the Tree Protection and Related Expenses Trust Fund that is generated from tree mitigation requirements in Part 12 of the Zoning Code for countywide Level 3 Tree Planting projects.

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

ACTION ITEMS:	Yes	No	
Emergency?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Justification of Emergency: If yes, explanation must include detailed nature of emergency. <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 5px;"></div>
Federal or State Mandate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision. <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 5px;"></div>
Fiscal Year Carryover?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Note: If yes, note must include explanation of all-year subfund carryover language. <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 5px;"></div>
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement Approval?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Attachment & Explanation: If yes, attach the Contract / Agreement and name of Department (and contact name) that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed / drafted? <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Public Works will provide oversight.</div>
Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Attachment: If yes, attach appropriate RC/BT form(s).
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper. <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 5px;"></div>
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper. <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 5px;"></div>
Related Enacted Ordinances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	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. <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 5px;"></div>

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

**ACTION ITEMS:**


	Yes	No
Continuation of Grant?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Reporting Requirements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Attachment: If yes, attach appropriate form(s).

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:   
(signature)

Date: 4/16/2020

Prepared By: Lee Dupree

Date: 4/3/2020

**ADMINISTRATIVE TRANSMITTAL**

To: MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325

Thru: John P. Pappas, P.E., Director of Public Works  
(Name, Job Title, Department)

Phone: 255-8707

E-mail: pappas@coj.net

From: Dave McDaniel, Chief of Mowing and Landscape Maintenance  
Initiating Department Representative (Name, Job Title, Department)

Phone: 255-4301

E-mail: mcdaniel@coj.net

Primary Contact: \_\_\_\_\_  
(Name, Job Title, Department)

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

CC: Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor

Phone: 255-5013

E-mail: jelsbury@coj.net

**COUNCIL 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: Council Member Ron Salem  
Initiating Council Member / Independent Agency / Constitutional Officer  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Primary Contact: \_\_\_\_\_  
(Name, Job Title, Department)  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

CC: Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor  
Phone: 904-630-1825 E-mail: jelsbury@coj.net

Legislation from Independent Agencies requires a resolution from the Independent Agency Board approving the legislation.

Independent Agency Action Item: Yes No

Boards Action / Resolution?

Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?

**FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED**

**City of Jacksonville, Florida  
Request for Budget Transfer Form**

Public Works / Mowing and Landscape Maintenance  
Department or Area Responsible for Contract / Compliance / Oversight CW  
Council District(s)

Reversion of Funds: n/a Fund / Center / Account / Project / Activity / Interfund / Future  
(if applicable) Fiscal Yr(s) of carry over (all-years funds do not require a carryover) Fund 15304 is all years

Section of Code Being Waived (if applicable): n/a CIP (yes or no): No

Justification for Waiver n/a

Justification for / Description of Transfer:  
To appropriate funds from the portion of the Tree Protection and Related Expenses Trust Fund that is generated from tree mitigation requirements in Part 12 of the Zoning Code for Level 3 Tree Planting projects. The Level 3 Tree Planting Program allows entities to propose a tree planting project on public property that would be funded by the Tree Protection and Related Expenses Trust Fund and which would be designed, coordinated, purchased, installed and guaranteed by an entity other than the City.

Net Amount Appropriated and/or Transferred: \$1,000,000.00

**CITY COUNCIL**

Requesting Council Member: \_\_\_\_\_ CM's District: \_\_\_\_\_  
Requesting Council Member: \_\_\_\_\_ CM's District: \_\_\_\_\_  
Prepared By: \_\_\_\_\_ Ordinance: \_\_\_\_\_

**OFFICE OF THE MAYOR**

BUDGET ORDINANCE     TRANSFER DIRECTIVE    TD / BT Number: \_\_\_\_\_

Date Rec'd.	Date Fwd.	Approved	Disapproved

Date of Action By Mayor: \_\_\_\_\_ Approved: \_\_\_\_\_  
Division Chief: Dave McDaniel, Chief of Mowing and Landscape Maintenance Date Initiated: 4/3/20  
Prepared By: Lee Dupree, Assistant Financial and Administrative Manager Phone Number: 255-8508  
Initiated / Requested By (if other than Department): \_\_\_\_\_