## **LEGISLATIVE FACT SHEET**

DATE:	03/25/2	BT or RC No:				
		(A	(Administration & City Council Bills)			
SPONSOR:	Office of Ed	conomic Development				
	P	Agency/Council Member)				
Contact for all	l inquiries and pres	contations:				
	•					
Provide Name:			Crawford			
Contact Number:		255-5446				
E.r	mail Address:	Paulc@coj.net				
		egislation is necessary? Provide; Who, What legislation and the Administration is response.	nat, When, Where, How and the Impact.) Council Research			
	50 words - Maximur					
(Millimani of 3.	JO WOLUS - MAXILLIUI	ii oi i page./				
			mous vehicles at a location in Jacksonville. This and currently does not have a presence in the			
United States, TI	he company is looking	to develop a footprint in US automoti	ve landscape. This will include the construction of an			
states in the Sout		of the City. Currently, the Company is	s considering options in Florida as well as other			
The Company pla	ans to have a new app	roximately 450,000 sg/ft of manufactu	uring space constructed on approximately 40 acres			
with a total capita	I investment of approx	imately \$100 million. It will operate the	he new facility with up to 200 employees paying upport the company's clients throughout the US.			
		•				
			factor in its decision to begin its US venture.  Grant based on 75 percent of the incremental			
			10 years, up to a maximum of \$7.5 million. 200 new employees (\$1,000 per job) the Company			
will hire. The Stat	Furthermore, the City will provide an up to \$200,000 Training Grant for up to 200 new employees (\$1,000 per job) the Company will hire. The State of Florida is also providing incentives for the Project in the form of a High-Impact Performance Incentive (HIPI)					
Award (\$8,000,000) and a Capital Investment Tax Credit (CITC) (100% of the Corporate Tax Liability).						
	TION: Total Amou		N/A as follows:			
	-		ers for each category listed below:			
(Name of Fund as	s it will appear in title o	f legislation)				
Name of Federal	Funding Source(s):	From:	Amount:			
		То:	Amount:			
Name of State Fur	ınding Source(s):	From:	Amount:			
		To:	Amount:			
Name of City of	acksonville Funding	From:	Amount:			
Source(s):	action the falluling	To	Amount:			

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Name of In-Kind Contribution(s):	From:		Amount:
,	То:		Amount:
Name & Number of Bond Account(s):	From:		Amount:
	To:		Amount:
Explain: Where are the funds coming fr	om, going here be ar nstruction	ON / FINANCIAL IMPACT / OTHER: to, how will the funds be used? Does the funding ongoing maintenance? and staffing obligation operation costs.	
The proposed funding obligation will be budgeted annually based upon Ad Valorem taxes paid (75%) and will last for 10 years or until a \$7.5 million payout is reached (whichever comes first). Furthermore, the Training Grant of \$200,000 will be budgeted each year based on the schedule in the EDA and will be based upon the number of jobs created multiplied by \$1,000 per job.			
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 nemergency.	nust include detailed nature of
Federal or State Mandate?	X	Explanation: If yes, explanation must include de including Statute or Provision.	tailed nature of mandate
Fiscal Year Carryover?	X	Note: If yes, note must include explanation of al language.	l-year subfund carryover
CIP Amendment?  Contract / Agreement Approval?	Х	Attachment: If yes, attach appropriate CIP former year amendment.  Attachment & Explanation: If yes, attach the Co of Department (and contact name) that will provine gotiations are on-going and with whom. Has a The OGC has reviewed and drafted the Age Economic Development will provide the over	ntract / Agreement and name de oversight. Indicate if OGC reviewed / drafted? reement. The Office of
Related RC/BT? Waiver of Code?	×	Attachment: If yes, attach appropriate RC/BT for Code Reference: If yes, identify code section(s) detailed explanation (including impacts) within w	in box below and provide
Code Exception?	Х	Code Reference: If yes, identify code in box bel explanation (including impacts) within white pap	

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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	No		
Continuation of Grant?	X		sed? Does the funding require a match? e and/or multi-year? If multi-year, note plications for the General Fund?
Surplus Property  Certification?	X	Attachment: If yes, attach appropriate	form(s).
Reporting Requirements?	X		City Council / Auditor) to receive reports nen reports are due. Provide Department number) responsible for generating
	<u>BU</u>	SINESS IMPACT ESTIMATE	
		e City is required to prepare a B ded below. Please check all exe	•
The propos	sed ordin	ance is required for compliance	with Federal or State law or regula
The propos	sed ordin	ance relates to the issuance or r	refinancing of debt;
		ance relates to the adoption of bources necessary to fund the bu	
		- · · · · · · · · · · · · · · · · · · ·	contract or an agreement, includin e grant or other financial assistanc
The propos	sed ordin	ance is an emergency ordinance	<b>;</b> ;
The ordina	nce relate	es to procurement;	
a. Part II o b. Section c. Section	of Chapter s 190.005 553.73, F	ance is enacted to implement <u>ar</u> r 163, Florida Statutes, relating to g 5 and 190.046, Florida Statutes, reg Florida Statutes, relating to the Flori Florida Statutes, relating to the Flo	rowth policy, county and municipal garding community development ida Building Code;
the using agency/office/departmequest, legislative fact sheet, e	nent and etc. A Bus		
Division Chief:			Date: 3/27/27
Prepared By:		(signature)	Date: 3/27/27  Date: 3/27/24
PAUL	- P.	(signature)	

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## ADMINISTRATIVE TRANSMITTAL

To:		www.coj.net/depart the Budget Office,		oudget/mayor-s-budget-review-committee te 325	
Thru:	N/A				
	(Name, Job Title, Department)				
	Phone:		E-mail: _		
From: Ed Randolph, Executive Director, Office of Economic Development (OED)			omic Development (OED)		
	Initiating Department Representative (Name, Job Title, Department)				
	Phone:	255-5455	E-mail: edwardr@coj.net		
Primary			•		
Contact:	(Name, Job T	itle, Department)			
	Phone:	_	E-mail:		
CC:	Brittany Norris, Intergovernmental Liaison, Office of the Mayor				
	Phone:	255-5024	E-mail:	bnorris@coj.net	

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## COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To:	Mary Staffo	opolous, Office of C	s, Office of General Counsel, St. James Bldg., Suite 480			
	Phone:	255-5062	E-mail:	mstaff@coj.net		
From:						
	Initiating Cou	ncil Member / Independ	lent Agency / Co	enstitutional Officer		
	Phone:		E-mail:			
Primary						
Contact:	(Name, Job T	itle, Department)				
	Phone:		E-mail:			
CC:	Brittany Norris, Intergovernmental Liaison, Office of the Mayor			ce of the Mayor		
	Phone:	255-5024	E-mail:	bnorris@coj.net		
approving	n from Indepo the legislation ant Agency A	on.	equires a resc Yes No	plution from the Independent Agency Board		
таерепа	•	tion / 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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