

## LEGISLATIVE FACT SHEET

DATE: 4/29/2025

BT or RC No: N/A BT25-086

(Administration & City Council Bills)

SPONSOR: Office of Economic Development

(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations: Office of Economic Development

Provide Name: Ed Randolph, Executive Director Contact No: 255-5455

Email EdwardR@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)

Ordinance 2022-905-A approved an Economic Development Agreement (EDA) between the City of Jacksonville (City) and Springfield MF Partners, LLC (Company) for the construction of a 202-unit market rate apartment community, to be known as Corner on Main, at 33 1st Street W., 1148 Main Street N., and 1100 Main Street N. Jacksonville, FL 32206, near the entrance of Downtown Jacksonville and east of Interstate-95. Springfield MF Partners, LLC (Company) was formed in 2021, comprising Corner Lot leaders Andy Allen, George Leone, and Scott Hobby. The vision of this project was created in collaboration with SPAR and the residents with the hopes of the project being recognized as the gateway to the Springfield Historic District.

The EDA, dated April 19, 2023, includes a seventy-five percent (75%) Recapture Enhanced Value (REV) Grant not to exceed \$5.5 million, payable over fifteen (15) years; and a Completion Grant not to exceed \$2 million, payable in two (2) tranches, with the first \$1 million payable at substantial completion and the remaining \$1 million payable one year thereafter. The deadline to complete the Project is 12/31/2025; however, the Company completed construction ahead of schedule and was issued a Certificate of Substantial Completion on 3/24/2025 and thus meets the requirements for the first \$1M disbursement. There is no impact on maximum indebtedness under the EDA or other terms. OED allocated \$2M for the Phase One Completion Grant for FOC QOF in FY25; however, the Company has requested additional time to complete the project. As such, we are requesting to reallocate \$1M in FY25 to cover the above referenced expense. The other \$1M will be encumbered for FOC QOF, with the remaining \$1M for the Phase One Completion Grant to be budgeted in FY26.

APPROPRIATION: Total Amount Appropriated \$1,000,000 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 the title of the legislation)

Name of Federal Funding Source(s)

From: \_\_\_\_\_ Amount: \_\_\_\_\_

To: \_\_\_\_\_ Amount: \_\_\_\_\_

Name of State Funding Source(s)

From: \_\_\_\_\_ Amount: \_\_\_\_\_

To: \_\_\_\_\_ Amount: \_\_\_\_\_

Name of COJ Funding Source(s)

From: General Fund Operating / FOC QOF, LLC 2024-418-A / Miscellaneous Grants and Aids

Amount: \$1,000,000

From: General Fund Operating / Springfield MF Partners 2022-905 / Misc Non-Departmental Expenditures

Amount: \$1,000,000

Name of In-Kind Contributions:

From: \_\_\_\_\_ Amount: \_\_\_\_\_

To: \_\_\_\_\_ Amount: \_\_\_\_\_

Name & No. 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 ongoing maintenance and staffing obligation? Per Chapter 122 & 106 regarding funding of anticipated post-construction operation costs. (Minimum of 350 words – maximum of 1 page.

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

ACTION ITEMS:

Emergency? Yes \_\_\_\_\_ No **X** \_\_\_\_\_

Justification of Emergency: If yes, explanation must include detailed nature of emergency.

**Federal or State Mandate?** Yes \_\_\_\_\_ No X \_\_\_\_\_

Explanation: If yes, explanation must include detailed nature of mandate include Statue or Provision.

**Fiscal Year Carryover?** Yes \_\_\_\_\_ No X \_\_\_\_\_

Note: If yes, note must include explanation of all-year subfund carryover language.

**CIP Amendment?** Yes \_\_\_\_\_ No X \_\_\_\_\_

Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.

**Contract/Agreement Approval?** Yes X \_\_\_\_\_ No \_\_\_\_\_

Attachment & Explanation: If yes, attach the Contract/Agreement & provide name of the Department and include contact name and telephone number of the person r that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed/drafted? OED will provide oversight and administration.

**Related RC/BT?** Yes \_\_\_\_\_ X No \_\_\_\_\_ If yes, attach appropriate RC/BT form(s)

**Waiver of Code?** Yes \_\_\_\_\_ No X \_\_\_\_\_

Code Reference: If yes, identify code section(s) in space below & provide detailed explanation (including impacts) within white paper.

**Code Exception:** Yes \_\_\_\_\_ No X \_\_\_\_\_

Code Reference: If yes, identify code section(s) in space below & provide detailed explanation (including impacts) within white paper.

**Related Enacted Ordinances?** Yes X \_\_\_\_\_ No \_\_\_\_\_

Code Reference: If yes, identify related code section(s) and ORD reference number in the space below & provide detailed explanation and any changes necessary within whitepaper.

Ordinance 2022-905-E

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

ACTION ITEMS:

**Continuation of Grant?** Yes \_\_\_\_\_ 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?** Yes \_\_\_\_\_ No X \_\_\_\_\_ Attachment: If yes, attach appropriate form(s)

**Reporting Requirements?** Yes \_\_\_\_\_ No X \_\_\_\_\_

Explanation: List agencies (including City Council/Auditor) to receive reports and frequency of reports, including when reports are due. Provide name of the Department and include contact name and telephone number of the person responsible for generating.

### **BUSINES IMPACT ESTIMATE**

Pursuant to Section 166.041(4), F.S., the City is required to prepare a Business Impact Estimate for ordinances that are NOT exempt from this requirement.

A list of ordinance exemptions are provided below. Please check all exemption boxes that apply to this ordinance. If an exemption is applicable, a Business Impact Estimate IS NOT required.

- ☐ The proposed ordinance is required for compliance with Federal or State law or regulation;
- ☐ The proposed ordinance relates to the issuance or refinancing of debt;
- ☐ The proposed ordinance relates to the adoption of budgets or budget amendments, including revenue sources necessary to fund the budget;
- ☒ The proposed ordinance is required to implement a contract or an agreement, including, but not limited to, any Federal, State, local, or private grant or other financial assistance accepted by the municipal government;
- ☐ The proposed ordinance is an emergency ordinance;
- ☐ The ordinance relates to procurement;
- ☐ The proposed ordinance is enacted to implement any of the following:
  - a. Part II of Chapter 163, Florida Statutes, relating to growth policy, county and municipal planning, and land development regulation, including zoning, development orders, development agreements and development permits;
  - b. Sections 190.005 and 190.046, Florida Statutes, regarding community development districts;
  - c. Section 553.73, Florida Statutes, relating to the Florida Building Code;
  - d. Section 633.202, Florida Statutes, relating to the Florida Fire Prevention Code.

If none of the boxes above are checked, then a Business Impact Estimate IS REQUIRED to be prepared by the using agency/office/department and submitted in the MBRC filing packet along with the memorandum request, legislative fact sheet, etc. A Business Impact Estimate form can be found at:

<https://www.jacksonville.gov/departments/finance/budget/mayor-s-budget-review-committee>

Director BD:

(Signature)

Date:

4/30/25

Prepared By:

(Signature)

Date:

4/29/2025

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: N/A  
(Name, Job Title, Department)

From: Ed Randolph, Executive Director, Office of Economic Development (OED)  
Initiating Department Representative (Name, Job Title, Department)

Phone: 255-5455 E-Mail: EdwardR@coj.net

Primary Contact: Ed Randolph, Executive Director, Office of Economic Development (OED)  
(Name, Job Title, Department)

Phone: 255-5455 E-Mail: EdwardR@coj.net

CC: Brittany Norris, Intergovernmental Liaison, Office of the Mayor

Phone: 255-5024 E-Mail: bnorris@coj.net

**COUNCIL MEMBER/INDEPENDENT AGENCY/CONSTITUTIONAL OFFICER TRANSMITTAL**

To: Mary Staffopoulos, Office of General Counsel, St. James Bldg., Suite 480

Phone: 255-5062 E-Mail: mstaff@coj.net

From: N/A  
Initiating Council Member/Independent Agency/Constitutional Officer

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Primary Contact: N/A  
(Name, Job Title, Department)

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

CC: Brittany Norris, Intergovernmental Liaison, Office of the Mayor

Phone: 255-5024 E-Mail: bnorris@coj.net

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

**Independent Agency Action Item:**

**Board(s) Action/Resolution?** Yes \_\_\_\_\_ No **X** \_\_\_\_\_

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

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