

## LEGISLATIVE FACT SHEET

DATE: 03/15/23

BT or RC No: BT 23-074  
(Administration & City Council Bills)

SPONSOR: Downtown Investment Authority  
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations: Lori Boyer, DIA CEO

Provide Name: Lori Boyer, DIA CEO

Contact Number: 255-5301

Email Address: boyerl@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.)

Appropriate \$500,000 of Fund Balance within the Downtown Economic Development Fund consisting of prior years Interest Income for Downtown Parks Programming & Maintenance within Downtown.

APPROPRIATION: Total Amount Appropriated: \$500,000.00 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 Funding Source(s):	From: DEDF Fund <u>Interest Income</u> _____	Amount: <u>\$500,000.00</u>
	To: DEDF Downtown Parks Programming & Maintenance _____	Amount: <u>\$500,000.00</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.)

The funds are within the Downtown Economic Development Fund, an All Years fund, and consist of prior years' interest income. The funds will be used to augment (i.e. enhance) current park maintenance (e.g. care, cleaning, and replacement of hardscape, landscape, furnishings) and programming activities of the COJ Parks Department in support of the Downtown destination parks, several of which are currently in design or under construction.

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

<b>ACTION ITEMS:</b>	<b>Yes</b>	<b>No</b>	
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: 20px; 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: 20px; 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: 20px; 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 type="checkbox"/>	<input checked="" 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; height: 20px; width: 100%; margin-top: 5px;"></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: 20px; 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: 20px; 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: 20px; 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"/>	Attachment: If yes, attach appropriate form(s).
Reporting Requirements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	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

Division Chief: Lori Boyer  
(signature)

Date: 3/17/23

Prepared By: Wade Jan Cowley  
(signature)

Date: 3-17-23

**ADMINISTRATIVE TRANSMITTAL**

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

**Thru:** Rachel Zimmer, Director of Intergovernmental Affairs, Office of the Mayor  
(Name, Job Title, Department)  
 Phone: 255-5006 E-mail: rachelz@coj.net

**From:** Lori Boyer, Downtown Investment Authority, CEO  
Initiating Department Representative (Name, Job Title, Department)  
 Phone: 255-5301 E-mail: boyerl@coj.net

**Primary Contact:** Lori Boyer, Downtown Investment Authority, CEO  
(Name, Job Title, Department)  
 Phone: 255-5301 E-mail: boyerl@coj.net

**CC:** Rachel Zimmer, Intergovernmental Affairs Liaison, Office of the Mayor  
 Phone: 255-5006 E-mail: rachelz@coj.net

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

To: Mary Staffopoulos, Office of General Counsel, St. James Suite 480  
Phone: 904-255-5062 E-mail: mstaff@coj.net

From: Lori Boyer, CEO of the Downtown Investment Authority  
Initiating Council Member / Independent Agency / Constitutional Officer  
Phone: 904-255-5301 E-mail: boyerl@coj.net

Primary Contact: Lori Boyer, Chief Executive Officer  
(Name, Job Title, Department)  
Phone: 255-5301 E-mail: boyerl@coj.net

CC: Rachel Zimmer, Director of Intergovernmental Affairs, Office of the Mayor  
Phone: 255-5006 E-mail: rachelz@coj.net

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

Independent Agency Action Item:

Boards Action / Resolution?  Yes  No

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

Executed DIA Resolution 2023-03-02

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