

# LEGISLATIVE FACT SHEET

DATE: 09/07/21

BT or RC No: BT21-133  
 (Administration & City Council Bills)

SPONSOR: Public Works  
 (Department/Division/Agency/Council Member)

Contact for all inquiries and presentations: Robin Smith

Provide Name: Robin Smith

Contact Number: 255-8710

Email Address: [robinsmith@coj.net](mailto:robinsmith@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.)

This BT is necessary to appropriate \$444,964.86 in grant funds from the Federal Emergency Management Agency for the purpose of surveying, engineering, design, plans preparation, permitting, and bidding for the project. Funded through the Hazard Mitigation Grant Program and approved by the Florida Division of Emergency Management, this project is for the improved drainage along McCoy's Creek channel. Deferral of this appropriation would result in the City of Jacksonville not receiving needed grant funds.

APPROPRIATION: Total Amount Appropriated \$444,964.86 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: Federal Emergency Management Agency	Amount:	\$444,964.86
	To: City of Jacksonville	Amount:	\$444,964.86

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

Name of City of Jacksonville Funding Source(s):	From:	Amount:	
	To:	Amount:	

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.)

FEMA has agreed to reimburse up to \$444,964.86 of the project cost for the successful completion of the design-related activities in compliance with the grant requirements.

**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; 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; 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; margin-top: 5px;"></div>
CIP Amendment?	<input checked="" type="checkbox"/>	<input 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 of the project. OGC and Risk Management have reviewed the request.</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; 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; 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; 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?

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?

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

Reporting Requirements?

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: 9/17/21

Prepared By:   
(signature)

Date: 9/17/21

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: John Pappas, Director, Public Works Department  
(Name, Job Title, Department)  
Phone: 255-8748 E-mail: [pappas@coj.net](mailto:pappas@coj.net)

From: Robin Smith, Chief, Engineering and Construction Management  
Initiating Department Representative (Name, Job Title, Department)  
Phone: 255-8710 E-mail: [robinsmith@coj.net](mailto:robinsmith@coj.net)

Primary Contact: Robin Smith, Chief, Engineering and Construction Management  
(Name, Job Title, Department)  
Phone: 255-8710 E-mail: [robinsmith@coj.net](mailto:robinsmith@coj.net)

CC: Leeann Krieg, Director of Intergovernmental Affairs, Office of the Mayor  
Phone: 255-5015 E-mail: [leeannk@coj.net](mailto:leeannk@coj.net)

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

To: Peggy Sidman, Office of General Counsel, St. James Suite 480  
Phone: 255-5055 E-mail: [psidman@coj.net](mailto:psidman@coj.net)

From: \_\_\_\_\_  
Initiating Council Member / Independent Agency / Constitutional Officer  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

CC: Leeann Krieg, Director of Intergovernmental Affairs, Office of the Mayor  
Phone: 255-5015 E-mail: [leeannk@coj.net](mailto:leeannk@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**



