LEGISLATIVE FACT SHEET

DATE:	11/02/23		BT or RC N	No: 5124-026
	.		(Administration & City	y Council Bills)
SPONSOR:	Planning and Developr	nent Departn	nent	
	(Department/Div	ision/Agency/Council N	Member)
Contact for a	Il inquiries and presentations	:	Arimus	Wells
Provide Nam	e:	Arimus Wel	ls, City Planner Superv	visor
Con	ntact Number:	255-78		-
Ema	ail Address:	arimusw@	coj.net	
	Paper (Explain Why this legislation is plete this form for Council introduced legislation)			
The Planning ar		ectfully requests		\$50,000 small matching grant s for the Springfield Historic District
Historical Resou Historic District. research, condu updating a minir	ning grant award is between the Ci urces to conduct a survey of histor The scope of work includes procu acting field surveys; completing a r mum two-hundred (200) existing F ervices, the City of Jacksonville wi	ic structures wit ring professions ninimum of two- lorida Master Si	hin the boundaries of t al historic preservation hundred (200) new Flo te File forms, and prep	the locally designated Springfield services, conducting archival orida Master Site File forms, paring a survey report. In order to
Task 1: Conductor The team will rethe survey and of Task 2: Conductor Each property of information like Task 3: Complete Once the field soft Master Site File Task 4: Complete Prepare draft sufficiences that soft Task 5: Complete Task 5: Complet	coordinated with the GIS database t Field Survey n the updated list of structures bui building type, date of construction te Florida Master Site File Forms	of sites built be ilt between 1930 , architect and / ill be evaluated priority sites. ectural context	etween 1930 and 1975 and 1975 will be visite or builder if known will and prioritized according that discusses the soci	ed and photographed and basic t be recorded. ing to potential significance. Florida ial, cultural, political, and other
	TION: Total Amount Appro		50,000	as follows:
Liet the cour	ce name and provide Object	rand Subobia	act Niumbare for as	ach category listed helow:

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tle of legislation)		
From:	Amount:	
То:	Amount:	
State of Florida, Department of State, Division of From: Historical Resources	Amount:	\$50,000.00
To: City of Jacksonville (Planning and Development)	Amount:	\$50,000.00
From:	Amount:	
То:	Amount:	
From:	_ Amount:	
То:	Amount:	
From:	Amount:	
То:	Amount:	
cipated post-construction operation costs. 1 page.) mall Matching Grant by the Division, grant number 24.h tury Survey," in the amount of \$50,000 ("Grant Award Ar to Line Item 3233, contained in the 2024 General Appr nority to administer this grant in accordance with Sectior the Springfield Historic District Midcentury Survey, in Ja storic preservation services; conduct archival research; Florida Master Site File forms; update a minimum two-l	.sm.200.030 for mount"). The Divi opriations Act, SI 1 267.0617, Florid acksonville. The s conduct field sur nundred (200) exi	the Project sion 32500, Laws da Statutes. scope of work vey; complete a isting Florida
	From: State of Florida, Department of State, Division of From: Historical Resources To: City of Jacksonville (Planning and Development) From: To: From: To: From: To: ROPRIATION / FINANCIAL IMPACT / OTHER of from, going to, how will the funds be used? Does the will there be an ongoing maintenance? and stafficipated post-construction operation costs. 1 page.) mall Matching Grant by the Division, grant number 24.h urry Survey," in the amount of \$50,000 ("Grant Award Arto Line Item 3233, contained in the 2024 General Appropriation to administer this grant in accordance with Section the Springfield Historic District Midcentury Survey, in Jactoric preservation services; conduct archival research; Florida Master Site File forms; update a minimum two-live in the service of the services of the ser	From: Amount: To: Amount: State of Florida, Department of State, Division of From: Historical Resources Amount: To: City of Jacksonville (Planning and Development) Amount: From: Amount: To: Amount:

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

ACTION ITEMS: Yes	No	
Emergency?	X	Justification of Emergency: If yes, explanation must include detailed nature of emergency.
<u> </u>		- Children
		Vo.
5 · · · · · ·		
Federal or State Mandate?	X	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.
Wallauto.		
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Fiscal Year X Carryover?		Note: If yes, note must include explanation of all-year subfund carryover language.
Carryover:		Grant Project Period: 07/01/23 - 06/30/24,
		Attachments (fund attach appropriate CID form(s). Include justification for
CIP Amendment?	x	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement X		Attachment & Explanation: If yes, attach the Contract / Agreement and name of Department (and contact name) that will provide oversight. Indicate if
Approval?		negotiations are on-going and with whom. Has OGC reviewed / drafted?
		Yes, please see attached Unsigned Grant Agreement; Arimus Wells, Planning and Development Department will provide oversight. Negotiations are not
		ongoing. OGC has not reviewed this agreement.
Related RC/BT? x		
Waiver of Code?	X	Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.
L		detailed explanation (including impacts) within write paper.
Code Exception?	Х	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.
		explanation (including impacts) within write paper.
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Related Enacted	X	Code Reference: If yes, identify related code section(s) and ordinance reference number in the box below and provide detailed explanation and any
Ordinances?	^	changes necessary within white paper.

ACTION ITEMS CONTINUED: Pu justification, and code provisions for	rpose / Check List. If "Yes" please provide detail by attaching or 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? Reporting Requirements? X	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:	Date: 11/2/2023
Prepared By:	(signature) Date: 11/2/2023

ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Jessi Xia, Budget Office, St. James Suite 325
Thru:	Josh Gideon, Interim Director, Planning and Development Department
	(Name, Job Title, Department)
	Phone: 255-8521
From:	Arimus Wells, City Planner Supervisor, Planning and Development Department
	Initiating Department Representative (Name, Job Title, Department)
	Phone: 255-7824 E-mail: <u>arimusw@coj.net</u>
Primary	Tatilitae treme, etc., tatilities etc.,
Contact:	(Name, Job Title, Department)
	Phone: 255-7824 E-mail: <u>arimusw@coj.net</u>
CC:	Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
	904-255-5006 E-mail: <u>Bnorris@coj.net</u>
COUN	CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
To:	Mary Staffopoulos, Office of General Counsel, St. James Suite 480
10.	Ivially Statispoulos, Stillos of School Godings, St. Salitos Salito
	Phone: 904-255-5062 E-mail: MStaff@coj.net
From:	Phone: 904-255-5062 E-mail: MStaff@coj.net
From:	
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FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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