

## LEGISLATIVE FACT SHEET

DATE: 06/09/23

BT or RC No: BT23-104  
(Administration & City Council Bills)

SPONSOR: Planning and Development  
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations: Bill Killingsworth

Provide Name: Bob Blanco

Contact Number: 255-7812

Email Address: Rblanco@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 proposed transfer in the amount of \$1,077,047.72 is to move funds from Building Inspection fund balance to the project titled "Ed Ball Hearing Room and Restroom Improvements" for the purpose of completing phase 2 of the 1st floor hearing room. Deferral of this amendment to the CIP would be detrimental to the City of Jacksonville as it would delay necessary completion of the new hearing room that will be used by Building Code Adjustment Board and various other commissions and boards throughout each month.

**APPROPRIATION:** Total Amount Appropriated \$1,077,047.72 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 | From: <u>Building Inspection Fund Balance</u>                       | Amount: <u>\$1,077,047.72</u> |
|                                      | To: <u>Ed Ball Hearing Room &amp; Restroom Improvements Project</u> | Amount: <u>\$1,077,047.72</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.)

This transfer from fund balance will not cause the City to incur any additional debt.

**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.<br><div style="border: 1px solid black; height: 30px; 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.<br><div style="border: 1px solid black; height: 30px; 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.<br><div style="border: 1px solid black; height: 30px; width: 100%; 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 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?<br><div style="border: 1px solid black; height: 30px; 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.<br><div style="border: 1px solid black; height: 30px; 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.<br><div style="border: 1px solid black; height: 30px; 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.<br><div style="border: 1px solid black; height: 30px; 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?<br><div style="border: 1px solid black; height: 40px; width: 100%;"></div>     |
| 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 generating<br><div style="border: 1px solid black; height: 30px; width: 100%;"></div> |

Division Chief: Joshua Gideon   
(signature)

Date: 6/9/2023

Prepared By: Bob Blanco   
(signature)

Date: 6/9/2023

**ADMINISTRATIVE TRANSMITTAL**

To: MBRC, c/o the 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](mailto:rachelz@coj.net)

From: Bill Killingsworth, Director Planning & Development  
Initiating Department Representative (Name, Job Title, Department)  
Phone: 255-7811 E-mail: [BillK@coj.net](mailto:BillK@coj.net)

Primary Contact: Bill Killingsworth, Director Planning & Development  
(Name, Job Title, Department)  
Phone: 255-7811 E-mail: [BillK@coj.net](mailto:BillK@coj.net)

CC: Rachel Zimmer, Director of Intergovernmental Affairs, Office of the Mayor  
Phone: 255-5006 E-mail: [rachelz@coj.net](mailto: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](mailto:mstaff@coj.net)

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

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

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