LEGISLATIVE FACT SHEET

DATE: 05/14/24		BT or Re	C No:	BTa	14-119
\ \frac{1}{2}		(Administration &	City Cour	ncil Bills)	
SPONSOR:		Public Works/Public B	Buildings		
	,,	(Department/Division/Agency/Co			
Contact for all inquiries and pre	sentations:	F	Roy Birb	al	
Provide Name:		Roy Birbal			
Contact Number:		255-4330		81	
Email Address:	rbirbal@coj.net				
PURPOSE: White Paper (Explain Why this will complete this form for Council introduce (Minimum of 350 words - Maximu	d legislation and				ct.) Council Research
This transfer is necessary to a) appropriate funds in the amount of \$1,250,000, duresult of lower than anticipated JEA value.	e to energy sav	rings, within the Public Buildings A			
APPROPRIATION: Total Amount List the source <u>name</u> and provious (Name of Fund as it will appear in title	de Object ar			as follows: egory listed	
Name of Federal Funding Source(s):	From:			Amount:	
Name of Federal Funding Cource(s).	То:			Amount:	
Name of State Funding Source/o)	From:			Amount:	
Name of State Funding Source(s):	То:			Amount:	
Name of City of Jacksonville Funding	From: Public	Buildings Allocations Fund		Amount:	\$1,278,372.79
Source(s):	To: Public	Buildings Allocations Funds		Amount:	\$1,278,372.79
Name of In-Kind Contribution(s):	From:		_	Amount:	
Name of m-Kind Contribution(s).	То:			Amount:	
Name & Number of Bond Association	From:			Amount:	
Name & Number of Bond Account(s):	То:			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 request will not result in additional debt to the City. ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each. **ACTION ITEMS:** Justification of Emergency: If yes, explanation must include detailed nature of Emergency? X Federal or State Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision. Mandate? Fiscal Year Carryover? Note: If yes, note must include explanation of all-year subfund carryover language. Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-**CIP Amendment?** X year amendment. Attachment & Explanation: If yes, attach the Contract / Agreement and name of Contract / Agreement Department (and contact name) that will provide oversight. Indicate if negotiations X Approval? are on-going and with whom. Has OGC reviewed / drafted? Related RC/BT? Attachment: If yes, attach appropriate RC/BT form(s). Code Reference: If yes, identify code section(s) in box below and provide detailed Waiver of Code? Х explanation (including impacts) within white paper. Code Reference: If yes, identify code in box below and provide detailed explanation Code Exception? (including impacts) within white paper. Code Reference: If yes, identify related code section(s) and ordinance reference Related Enacted number in the box below and provide detailed explanation and any changes Ordinances? necessary within white paper.

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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?		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?		x	Attachment: If yes, attach appropriate form(s).		
Reporting Requirements?		X	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 reports.		
		<u>B</u>	USINESS IMPACT ESTIMATE		
Pursuant to Section 166. ordinances that are NOT			the City is required to prepare a Business Impact Estimate for this requirement.		
			vided below. Please check all exemption boxes that apply to this le, a Business Impact Estimate IS NOT required.		
The propose	d ordir	nance is	s required for compliance with Federal or State law or regulation;		
The propose	d ordir	nance r	elates to the issuance or refinancing of debt;		
			elates to the adoption of budgets or budget amendments, including ry to fund the budget;		
	ny Fede	eral, Sta	s required to implement a contract or an agreement, including, but not ate, local, or private grant or other financial assistance accepted by		
The propose	d ordir	nance is	s an emergency ordinance;		
The ordinand	ce relat	tes to p	rocurement;		
The propose	d ordir	nance is	s enacted to implement <u>any</u> of the following:		
	pment r	regulatio	florida Statutes, relating to growth policy, county and municipal planning, and on, including zoning, development orders, development agreements and		
	b. Sections 190.005 and 190.046, Florida Statutes, regarding community development districts;				
			Statutes, relating to the Florida Building Code; a Statutes, relating to the Florida Fire Prevention Code.		

If none of the boxes above are checked, then a Business Impact Estimate <u>IS REQUIRED</u> 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.coj.net/departments/finance/budget/mayor-s-budget-review-committee

Division Chief: (signature)

Prepared By:

Date: 5/14/24

ADMINISTRATIVE TRANSMITTAL

	(Name, Job	Title, Department)							
	Phone:	255-5000	E-mail:	BNorris@coi.леt					
From:	Steve Long	, Operations Direc	tor, Public Work	5					
	Initiating Department Representative (Name, Job Title, Department)								
	Phone:	255-8748	E-mail:	slone@coi.ne					
Primary	Steve Long	, Operations Direc	tor, Public Work	5					
Contact	Initiating Department Representative (Name, Job Title, Department)								
	Phone:	255-8748	E-mail: _	slong@coj.net	W.				
	Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor								
CC:	Brittany No	rris, Director of Inte	rgovernmental.	Affairs, Office of the Mayor					

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To:	Mary Staffopoulos, Office of General Counsel, St. James Suite 480						
	Phone: 904-255-50	E-mail: mstaff@coj.net					
From:							
	Initiating Council Member /	ndependent Agency / Constitutional Officer					
	Phone:	E-mail:					
Primary							
Contact	(Name, Job Title, Departme	nt)					
	Phone:	E-mail:					
CC:	Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor						
	Phone: 255-5000	E-mail: <u>BNorris@coj.net</u>					
Legislatio		cies requires a resolution from the Independent Agency Board approving					
Independ	ent Agency Action Item:	Yes No					
	Boards Action / Resolut	Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?					

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED