

APPROPRIATION: Total Amount Appropriated N/A 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: _____	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.)

N/A as to funding. Item does not include any appropriations. No adverse impact to the City of Jacksonville.

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

ACTION ITEMS:

Emergency? Yes No

Justification of Emergency: If yes, explanation must include detailed nature of emergency.

Federal or State Mandate? Yes No

Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.

Pursuant to Section 163.3177(3), Florida Statutes, the 5-year capital improvement element schedule of projects must be updated on an annual basis.

Fiscal Year Carryover? Yes No

Note: If yes, note must include explanation of all-year subfund carryover language.

CIP Amendment? Yes No

Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.

Contract / Agreement Approval?

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?

Related RC/BT?

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

Waiver of Code?

Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.

Code Exception?

Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.

Related Enacted Ordinances?

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.

The Capital Improvement Element's Schedule of Projects includes all of the projects approved within the CIP Ordinance 2022-505-E and any amendments to the CIP that have happened since the last CIE Schedule of Projects approval. The last CIE Schedule of Projects was approved pursuant to Ordinance 2022-120-E. The CIE Schedule of Projects also includes the Mobility System Projects that were adopted with Ordinance 2020-86-E. The Duval County projects that are part of the TPO's Transportation Improvement Plan and the Long Range Transportation Plan are also included as part of the CIE's Schedule of Projects.

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?

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

Division Chief:

Kristen D. Reed
(signature)

Date:

1/25/23

Prepared By:

[Signature]
(signature)

Date:

1/25/23

ADMINISTRATIVE TRANSMITTAL

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

Thru: William B. Killingsworth, Director, Planning and Development Department
(Name, Job Title, Department)
Phone: 255-7811 E-mail: BillK@coj.net

From: Kristen Reed, Chief, Community Planning Division, Planning and Development Department
Initiating Department Representative (Name, Job Title, Department)
Phone: 255-7837 E-mail: Kreed@coj.net

Primary Contact: Helena Parola, City Planner Supervisor, Community Planning Division, Planning and Development De
(Name, Job Title, Department)
Phone: 255-7842 E-mail: Hparola@coj.net

CC: Rachel Zimmer, Intergovernmental Affairs Coordinator, Office of the Mayor
904-255-5006 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: _____
Initiating Council Member / Independent Agency / Constitutional Officer
Phone: _____ E-mail: _____

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

CC: Rachel Zimmer, Intergovernmental Affairs Coordinator, Office of the Mayor
904-255-5006 E-mail: RachelZ@coj.net

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

Independent Agency Action Item: **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