LEGISLATIVE FACT SHEET

DATE:	05/19/22			В	T or RC No:	BT22-1	D86
					n & City Counc		
SPONSOR:	Parks, Recr			ervices Departi /Division/Agency/C			Division
Contact for	all inquiries and pr	resentations_		1	Kara Tucker		
Provide Nar	ne:			Kara Tucker			
Сс	ontact Number:	255-5472					
En	nail Address: <u>Ka</u>	raT@coj.net					
will complete this	te Paper (Explain Why th s form for Council introdu 350 words - Maxim	uced legislation and					Council Research
Statue 316.008 physically disa	ines Special Revenue 3(4) and Sec 804.1012 bled persons in the Co bled persons. These fo	The parking fine ounty and to provi	es shall be us de funds to d	sed to improve acc conduct public awa	essibility and eq reness program	ual opportuni	ty to qualified
Disability Cour	tion request will provid ncil initiatives, emerger accessible electronic f	ncy assistance pro	ogram, the w	heelchair ramp pro			
	creation and Commun of 11505-163102 Park				uests authoriza	tion to submit	legislation for the
	ATION: Total Am			\$800,000. ct Numbers for		as follows y listed bel	
(Name of Fund	d as it will appear in titi	le of legislation)	Handicap Pa	arking Fines	<u>.</u>		
Name of Federal Fu	eral Funding Source(s):	From:				Amount: _	
		То:				Amount:	
Name of State	Funding Source(s):	From:				Amount:	
		To:				Amount:	
		From: 0000135		ance 11505-163102	389010-000000-	Amount	\$800,000.00
Name of City of	of Jacksonville Funding	Trustfund	d Authorized E	xpenditures-11505-1	63102-549006-	Amount:	\$800,000.00
Name of In-Kii	nd Contribution(s):	From:			<u>.</u>	Amount:	
	wattingstately.	То:				Amount:	

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Name & Number of Bond	From:	Amount:						
Account(s):	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.) Parking Fines Revenue Fund is a permanent fund. Funding is received from citations issued to individuals parked illegally in designated accessible parking spaces in connection with the Florida Stutue 316.008(4) and Municipal Code 804.1012 . 70% of the citation fines collected is deposited in the Handicap Parking Fines Fund. The handicap parking fines shall be used to improve accessiblity and equal opportunity to person with disabilities in the county and to provide funds to conduct public awareness programs in the county for persons with disabilities. Funds shall be appropriated by the Council prior to expenditure. No match is required. Funding shall not lapse at the end of any fiscal year.								
ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.								
ACTION ITEMS: Yes Emergency?	No X	Justification of Emergency: If yes, explanation must include detailed nature of emergency.						
Federal or State Mandate?		Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.						
		Fiorida Statue316.008(4) madates funds to be used to improve accessibility and equal opportunity to qualified physically disabled persons in the County and to provide funds to conduct public awareness programs in the County conerning disabled persons.						
Fiscal Year Carryover?		Note: If yes, note must include explanation of all-year subfund carryover language.						
		Funds shall not lapse but shall carry forward year to year; per ordinance 804-1012.						
CIP Amendment?	×	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? x		Attachment: If yes, attach appropriate RC/BT form(s).						
Waiver of Code?	X	Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.						
Code Exception?	Х	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.						
		Sec 804.1012						

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

	I ITEMS: entinuation of Grant?	1 1 Y	Expla fundi	ng for a spec	ific time frame a	e used? Does the find/or multi-year? If or the General Fund	multi-year, note ye		
(plus Property Certification? Reporting equirements?		Explain freque contain A ser (APE The representation of the repres	anation: List ency of repo- act name and mi-annual sta 0S1H8) is rec eport is distr er, Principal A	rts, including what telephone numle tement of account terment of account terment of account terme to the City to the City terms are the city to the City terms are th	ling City Council / A en reports are due, per) responsible for inting for the Handic comonths from the G y Auditors (Kim Tay bled Services-Kara	Provide Department generating reports cap Parking Fines General Accounting flor, Council Audito	ent (include Fund Department, r, Heather	
Divis	ion Chief: <u>Kar</u>	a Tucker 🔸	ara (signa		oclar		Date:	5/19/2022	
Pre	pared By: <u>Lois</u>	Smokes 🧷	(signa	ature)			Date:	5/19/2022	
			ADN	IINISTRAT	IVE TRANSI	<u>/ITTAL</u>			
To:	MBRC, c/o	Jasmine Jor	dan, Bu	dget Office	, St. James S	Suite 325			
Thru:		Daryl Joseph, Director, Parks, Recreation and Community Services Department Name, Job Title, Department)							
	Phone:	•		E-mail:]	Djoseph@coj	<u>net</u>			
From:	From: Kara Tucker, Chief, Disabled Services Division, Parks, Recreation and Community Services Department						partment		
	Initiating Department Representative (Name, Job Title, Department)								
	Phone:	255-5472		E-mail:	KaraT@coj.n	et			
Primary				es Division	, Parks, Recrea	ation and Commu	nity Services Dep	artment	
Contact:	(Name, Job Title, Department)								
	Phone:	255-5472		E-mail:	KaraT@coj.n	ct		7,	
CC:	Rachel Zimi		or of Inte	_		Office of the Ma	iyor		
	Phone:	255-5006		E-mail:	rachelz@c	coj.net			

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To:	Peggy Sidi	Peggy Sidman, Office of General Counsel, St. James Suite 480								
	Phone:	255-5055	E-mail: _	psidman@coj.net						
From:										
	Initiating Cou	ncil Member / Independe	ent Agency / C	onstitutional Officer						
	Phone:		E-mail: _							
Primary										
Contact:	(Name, Job 7	Fitle, Department)								
	Phone:		E-mail:							
CC:	Rachel Zin	nmer, Director of Int	ergovernme	ental Liaison, Office of the Mayor						
	Phone:	255-5006	E-mail: _	rachelz@coj.net						
Legislation the legis		ependent Agencies ı	requires a re	esolution from the Independent Agency Board approving						
Indepen	dent Agency	y Action Item: Ye		American Marie Marie and Marie and Marie M						
	Boards Act	ion / Resolution?		Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?						

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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