

LEGISLATIVE FACT SHEET

DATE: 09/09/21

BT or RC No: BT22-009
 (Administration & City Council Bills)

SPONSOR: Emergency Preparedness Division
 (Department/Division/Agency/Council Member)

Contact for all inquiries and presentation: Division Chief of Emergency Preparedness

Provide Name: Todd Smith

Contact Number: 904-255-3118

Email Address: todds@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.)

The City of Jacksonville/Duval County Emergency Preparedness Division has been awarded financial assistance from the Department of Homeland Security/FY 2021 Port Security Grant Program. The Port Security Grant Program is one of four grant programs that constitute DHS/FEMA's focus on transportation infrastructure security activities. This program is part of a comprehensive set of measures authorized by Congress and implemented by the Administration to help strengthen the Nation's critical infrastructure against risks associated with potential terrorist attacks. The DHS/Port Security Grant Program provides funding to support increased port-wide risk management and protect critical surface transportation infrastructure from acts of terrorism, major disasters, and other emergencies. The Port Security Grant Program supports the goal to Strengthen National Preparedness and Resilience by enhancing maritime security.

Emergency management and incident response activities require carefully managed resources to meet the incident needs. The FY2021 Port Security Grant Program funding will be utilized to purchase one (1) 37' CBRNE Capable Fire Suppression Hazmat Response Boat.

APPROPRIATION: Total Amount Appropriated \$450,000.00 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: Department of Homeland Security	Amount:	\$337,500.00
	To: Fire and Rescue Grants	Amount:	\$337,500.00

Name of State Funding Source(s):	From:	Amount:	
	To:	Amount:	

Name of City of Jacksonville Funding	From: Reserve for Federal Programs	Amount:	\$112,500.00
	To: <u>Fire and Rescue Grants</u>	Amount:	<u>\$ 112,500.00</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.)

Funding for this grant project is from the DHS/FEMA FY2021 Port Security Grant Program (PSGP). Agreement No. EMW-2021-PU-00446. The period of performance and budget period of this grant is from 09/01/2021 to 08/31/2024. The Port Security Grant Project amount is \$450,000.00. The Port Security Grant Program has a local cost share requirement of 25 percent of the total project cost. DHS/FEMA will provide federal funding amounting to 75 percent of the total project amount, \$337,500.00 with the remaining \$112,500.00 funded by the City of Jacksonville. The funds will be used to purchase one (1) 37' aluminum, open-ocean and inshore, CBRNE capable fire suppression hazmat response boat. This critical maritime response vessel will be staffed and readied for deployment from Jacksonville Fire and Rescue Station #48 located on JAXPORT Blount Island Marine Terminal. The maintenance of the Port Security Grant Program agreement will be coordinated through the City of Jacksonville Emergency Preparedness Division.

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. <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. <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. <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 5px;"></div>
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement Approval?	<input checked="" type="checkbox"/>	<input 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? <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Todd Smith, Division Chief of Emergency Preparedness will provide oversight of the FY2021 Port Security Grant Program awarded project.</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.

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.

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?
			<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 reports.
			<div style="border: 1px solid black; height: 40px; width: 100%;"></div>

Division Chief: 
(signature)

Date: 9/9/2021

Prepared By: 
(signature)

Date: 9/9/2021

ADMINISTRATIVE TRANSMITTAL

To: MBRC, (c/o Jasmine Jordan, Budget Office, St. James Suite 325

Thru: Leeann Krieg, Director of Intergovernmental Affairs, Office of the Mayor
(Name, Job Title, Department)

Phone: 255-5015 E-mail: leeannK@coj.net

From: Todd Smith, Division Chief of Emergency Preparedness
Initiating Department Representative (Name, Job Title, Department)

Phone: 255-3118 E-mail: todds@coj.net

Primary Contact: Todd Smith, Division Chief of Emergency Preparedness
(Name, Job Title, Department)

Phone: 255-3118 E-mail: todds@coj.net

CC: Leeann Krieg, Director of Intergovernmental Affairs, Office of the Mayor

Phone: 255-5015 E-mail: leeannk@coj.net

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To: Peggy Sidman, Office of General Counsel, St. James Suite 480
Phone: 904-630-4647 E-mail: psidman@coj.net

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

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

CC: Leeann Krieg, Director of Intergovernmental Affairs, Office of the Mayor
Phone: 904-255-3015 E-mail: leeannK@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