## **LEGISLATIVE FACT SHEET**

DATE:	08/06/25	BT or RC No:				
		(Administration & City Council Bills)	1			
SPONSOF		cue Department, Emergency Preparedness Divisio	[			
	(Departme	ent/Division/Agency/Council Member)				
Contact fo	r all inquiries and presentation	ons: Noah Ray				
Provide Na	ar	Noah Ray				
	ontact Numbe 9042553117	Noan nay	ı			
	mail Address: <u>nray@coj.net</u>					
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 Local Mitigation Strategy (LMS) is the primary component of a statewide process of community-based hazard mitigation planning. The purpose of the LMS is to identify the hazards to which Duval County is vulnerable and then identify actions to minimize or avoid the impacts from those hazards. Those actions include grant funded projects as well as municipal plans, policies, and ordinances.						
The LMS is required by the State of Florida and FEMA in order to qualify the City, the Urban Service Districts, and other entities that would be seeking pre and post-disaster grant funding, following a declared disaster. No funding is required to enact this legislation. Periodic update of the plan is required for compliance with the federal hazard mitigation planning standards contained in 44 CFR 201.6(b)-(d) and F.S. 252.3655.						
Beach and Ja	process is implemented through a cksonville Beach, the Town of Bak organizations.	partnership between the City of Jacksonville, The Cities of Aldwin, independent authorities, military partners, local nonpro-	Atlantic Beach, Neptune fit organizations, and			
The plan is up	dated every five years to account	for new data and mitigation priorities within the County.				

List the source <u>name</u> and provi		Appropriated: \$0.00 bject and Subobject Numbers for ea	as follows: ach category listed belo	ow:
(Name of Fund as it will appear in title		-	Active George	
Name of Federal Funding Source(s):	From:	: Federal Emergency Management Agency	Amount:	\$0.00
14410	То:	Grant Capital Improvement Projects	Amount:	\$0.00
Name of State Funding Source(s):	From:		Amount:	
Valley of State ( State )	То:		Amount:	
Name of City of Jacksonville Funding S	From:	COJ Reserve for Federal Funds	Amount:	\$0.00
Tamo di diny di ducitori inici	To:	Grant Capital Improvement Projects	Amount:	\$0.00
Name of In-Kind Contribution(s):	From:		Amount:	
The state of the s	То:		Amount:	
Name & Number of Bond Account(s):	From:		Amount:	
,	To:		Amount:	
Explain: Where are the funds coming f	from, go there b onstruc	ATION / FINANCIAL IMPACT / OTHI going to, how will the funds be used? Does on be an ongoing maintenance? and staffing ction operation costs.	the funding require a match	1? Is the 122 & 106
There is no funding associated with this	3 Ordin	ance.		

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

ACTION ITEMS:	Yes No	
Emergency?	Х	Justification of Emergency: If yes, explanation must include detailed nature of emergency.
_		
Federal or State Mandate?	X	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.
		Required for compliance with the federal hazard mitigation planning standards contained in 44 CFR 201.6(b)-(d) and F.S. 252.3655.
Fiscal Year Carryover?	×	Note: If yes, note must include explanation of all-year subfund carryover language.
CIP Amendment?	X	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement Approval?	x	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?
		Subaward Agreement Number: H1110 SUB-RECIPIENT: City of Jacksonville   PROJECT #: 4673-002-R PROJECT TITLE: City of Jacksonville, Wrico Drive #1, Acquisition
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?	x	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.
	-	
Related Enacted Ordinances?	x	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.
_		2020-701 (previous legislation adopting the LMS in 2020)

**ACTION ITEMS:** Yes No Explanation: How will the funds be used? Does the funding require a match? Is Continuation of Grant? the funding for a specific time frame and/or multi-year? If multi-year, note year of Х grant? Are there long-term implications for the General Fund? Surplus Property Attachment: If yes, attach appropriate form(s). Certification? Explanation: List agencies (including City Council / Auditor) to receive reports and Reporting frequency of reports, including when reports are due. Provide Department (include Requirements? contact name and telephone number) responsible for generating reports. Annual reports are due to the Florida Division of Emergency Management in accordance with F.S. 252.3655. Emergency Preparedness Division provides the annual report on behalf of Duval County. Reports provided by Noah Ray, Supervisor, (904) 255-3117. **BUSINESS IMPACT ESTIMATE** Pursuant to Section 166.041(4), F.S., the City is required to prepare a Business Impact Estimate for ordinances that are NOT exempt from this requirement. A list of ordinance exemptions are provided below. Please check all exemption boxes that apply to this ordinance. If an exemption is applicable, a Business Impact Estimate IS NOT required. The proposed ordinance is required for compliance with Federal or State law or regulation; The proposed ordinance relates to the issuance or refinancing of debt; The proposed ordinance relates to the adoption of budgets or budget amendments, including revenue sources necessary to fund the budget; The proposed ordinance is required to implement a contract or an agreement, including, but not limited to, any Federal, State, local, or private grant or other financial assistance accepted by the municipal government: The proposed ordinance is an emergency ordinance; The ordinance relates to procurement; or The proposed ordinance is enacted to implement the following: a. Part II of Chapter 163, Florida Statutes, relating to growth policy, county and municipal planning, and land development regulation, including zoning, development orders, development agreements and development permits; b. Sections 190,005 and 190,046, Florida Statutes, regarding community development districts: c. Section 553.73, Florida Statutes, relating to the Florida Building Code; or d. Section 633.202, Florida Statutes, relating to the Florida Fire Prevention Code. If none of the boxes above are checked, then a Business Impact Estimate IS REQUIRED 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: <a href="https://www.coj.net/departments/finance/budget/mayor-s-budget-review-committee">https://www.coj.net/departments/finance/budget/mayor-s-budget-review-committee</a> Division Chief: (signature) Prepared By: (signature)

ACTION ITEMS CONTINUED: Purpose / Check List. If "Yes" please provide detail by attaching justification,

and code provisions for each.

## **ADMINISTRATIVE TRANSMITTAL**

To:	MBRC, c/o the Budget Office, St. James Suite 325						
Thru:	Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor						
	(Name, Job	Title, Department)					
	Phone:	255-5000	E-mail:	BNorris@coj.net			
From:	Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor						
	Initiating Department Representative (Name, Job Title, Department)						
	Phone: _	255-5000	E-mail:	BNorris@coj.net			
Primary	Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor						
Contact	(Name, Job	Title, Department)					
	Phone: _	255-5000	E-mail:	BNorris@coj.net			
CC:	Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor						
	Phone:	255-5000	E-mail:	BNorris@coj.net			

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