

LEGISLATIVE FACT SHEET

DATE: 03/29/22

BT or RC No: NA

SPONSOR: Public Works Real Estate in Councilmember Gaffney's District 7
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation: Renee Hunter

Provide Name: Renee Hunter, Chief, Real Estate Division

Contact Number: 904-255-8234

Email Address: ReneeH@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.)

Please provide the Public Works Real Estate Division with authority to request legislation necessary for the City Council to authorize the Mayor to execute the attached Purchase & Sale Agreement ("PSA") in substantially the form attached for the purchase of four (4) properties owned by Bradley Spevak. See RE#'s: 032093-0010, 032092-0000, 032088-0000, 031962-0000 and maps attached. These properties are adjacent to the future site of the Medical Examiner's Office ("MEO") at 881 Golfair Boulevard or RE# 031961-0000. The parcels will allow for additional parking and green space for the site.

This PSA provides for the acquisition of approximately 0.92 acres total for all four (4) properties. The City's appraised value for the properties combined is \$109,000.00. The seller would not accept less than his appraised value of \$156,450.00. Therefore, the agreed upon purchase price for the properties is \$156,450.00.

If additional information or assistance is required, please contact Renee Hunter at 255-8234 or ReneeH@coj.net.

Thank you

APPROPRIATION: Total Amount Appropriated _____ 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.)

<p>The funds for the acquisition will come from 32111.153103.561011.006237</p>
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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"/>	<p>Justification of Emergency: If yes, explanation must include detailed nature of emergency.</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Federal or State Mandate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Fiscal Year Carryover?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Note: If yes, note must include explanation of all-year subfund carryover language.</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.</p>
Contract / Agreement Approval?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>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?</p> <div style="border: 1px solid black; padding: 5px;"> <p>OGC has reviewed and approved the Purchase and Sale Agreement in substantially the form attached. Public Works Real Estate will oversee execution of the agreement. The Medical Examiner's Office will have oversight thereafter.</p> </div>
Related RC/BT?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Attachment: If yes, attach appropriate RC/BT form(s).</p>
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
Related Enacted Ordinances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p>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.</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>

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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Reporting Requirements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

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

Division Chief: 
(signature)

Date: 3/29/22

Prepared By: 
(signature)

Date: 3/29/22

ADMINISTRATIVE TRANSMITTAL

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

Thru: Rachel Zimmer, Intergovernmental Affairs Liaison, Office of the Mayor

Initiating Department Representative (Name, Job Title, Department)

Phone: 255-5006 E-mail: rachelz@coj.net

From: Rachel Zimmer, Intergovernmental Affairs Liaison, Office of the Mayor

Initiating Department Representative (Name, Job Title, Department)

Phone: 255-5006 E-mail: rachelz@coj.net

Primary Contact: Rachel Zimmer, Intergovernmental Affairs Liaison, Office of the Mayor

(Name, Job Title, Department)

Phone: 255-5006 E-mail: rachelz@coj.net

CC: Rachel Zimmer, Director of Intergovernmental Affairs, Office of the Mayor

904-255-5006 E-mail: rachelz@coj.net

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To: Peggy Sidman, Office of General Counsel, St. James Suite 480

Phone: 904-255-5055 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: Rachel Zimmer, Director of Intergovernmental Affairs, 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



City of Jacksonville, Florida

Lenny Mayor

Department of Public Works
Real Estate Division
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Jacksonville, FL 32202
(904) 255-8700
www.coj.net

ONE CITY. ONE JACKSONVILLE.

March 29, 2022

TO: Brian Hughes, Chairman
Mayor's Budget Review Committee

THRU: John Pappas, P.E. *John Pappas*
Director, Public Works Department

FROM: Renee Hunter, Chief *Renee Hunter*
Public Works Real Estate Division

SUBJECT: Purchase and Sale Agreement for properties adjacent to future MEO site
RE# 032093-0010, RE# 032092-0000, RE# 032088-0000, RE# 031962-0000

Please provide the Public Works Real Estate Division with authority to request legislation necessary for the City Council to authorize the Mayor to execute the attached Purchase & Sale Agreement ("PSA") in substantially the form attached for the purchase of four (4) properties owned by Bradley Spevak. See RE#'s: 032093-0010, 032092-0000, 032088-0000, 031962-0000 and maps attached. These properties are adjacent to the future site of the Medical Examiner's Office ("MEO") at 881 Golfair Boulevard or RE# 031961-0000. The parcels will allow for additional parking and green space for the site.

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If additional information or assistance is required, please contact Renee Hunter at 255-8234 or ReneeH@coj.net.

Thank you

RH/rm

cc: The Honorable Reggie Gaffney, Council District 7
Tim Crutchfield, Medical Examiner's Office

Attachments