## **LEGISLATIVE FACT SHEET**

DATE: _		04/14/25			BT or RC No:		
SDONSO	D. [	Dublic Works Box	al Estato in C	ouncil Procie	Hont White's D	ictrict 12	
SPONSOR: Public Works Real Estate, in Council President White's District 12  (Department/Division/Agency/Council Member)							
			ν		,	,	
Contact fo	r all inqu	iries and present	tation:		Renee Hur	nter	
Provide Na	ame:		Renee I	lunter, Chief, F	Real Estate Division	on	
C	Contact N	lumber:	904-2	255-8234			
Ε	Email Add	dress:	Reneel	H@coj.net.			
Research will (Minimum	complete thi of 350 wo	Explain Why this legisl is form for Council intro ords - Maximum of cation for the Public V	oduced legislation a f 1 page.)	nd the Administr	ation is responsible	for all other le	gislation.
to approve the Plat Book 64	ne vacation , Page 92	of easements over and as established in Ordinance #2015-633	a previously clos n the Plat of Gen	ed portion of the eral Avenue, of	ne right of way Ge f the Current Pub	eneral Avenue lic Records o	e as recorded in of Duval County,
of Jacksonvil 369,780 squ	lle and JEA are foot co of the vaca	uper Markets, Inc. (r A easements reserve Id storage warehous tion of its easement.	ed in the ordinance. The easemer	ce aforementior Its are identical	ned, to accommo	date the deve I description.	elopment of a JEA confirmed
!		•					
							e e
		Total Amount <i>i</i> ne and provide C		object Num	bers for each	as follow	

(Name of Fund as it will appear in t	tie of legislation)	14
Name of Federal Funding Source(s)	From:	Amount:
L	То:	Amount:
Name of State Funding Source(s):	From:	Amount:
	То:	Amount:
Name of City of Jacksonville	From:	Amount:
Funding Source(s):	То:	Amount:
Name of In-Kind Contribution(s):	From:	Amount:
,	То:	Amount:
Name & Number of Bond	From:	Amount:
Account(s):	To:	Amount:
122 & 106 regarding funding of anti (Minimum of 350 words - Maximum of	cipated post-construction operation costs 1 page.)	
General Fund 00111.152001.34907	© closure application fee with encroachm 0.000000.000000000.00000.	ents fee which has been deposited in the
·		
		•

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

ACTION ITEMS: Yes Emergency?	No	Justification of Emergency: If yes, explanation must include detailed nature of
Line.genoy:	ت	emergency.
Federal or State  Mandate?	×	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.
<del></del>		
		20
Fiscal Year Carryover?	×	Note: If yes, note must include explanation of all-year subfund carryover language.
	ليسيا	
CIP Amendment?	×	Attachment: If yes, attach appropriate CIP form(s). Include justification for
Contract / Agreement x	H	mid-year amendment.  Attachment & Explanation: If yes, attach the Contract / Agreement and name of Department (and contact name) that will provide oversight. Indicate if
Approval? ^	Ш	negotiations are on-going and with whom. Has OGC reviewed / drafted?  OGC has approved the hold harmless covenant template.
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 detalled explanation (including impacts) within white paper.
. —		
Code Exception?	Ľ	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.
ACTION ITEMS CONTINUES justification, and code provisi		cose / Check List. If "Yes" please provide detail by attaching each.
ACTION ITEMS: Yes	No	

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Continua (	tion of Grant?	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 Pro	opertv \		
Certifica		Attachment: If yes, attach appropriate form(s).  Explanation: List agencies (including City Council / Auditor) to receive reports	
Requirem		and frequency of reports, including when reports are due. Provide Department (include contact name and telephone number) responsible for generating	
	<u>B</u>	USINESS IMPACT ESTIMATE	
for ordinances that a provided below. Plea	are <u>NOT</u> exempt from thi	ty is required to prepare a Business Impact Estimate is requirement. A list of ordinance exemptions are boxes that apply to this ordinance. If an exemption <u>B NOT</u> required.	
X	The proposed ordinance is required for compliance with Federal or State law or regul		
	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, developmen orders, development agreements and development permits;
<ul> <li>b. Sections 190.005 and 190.046, Florida Statutes, regarding community developmen</li> <li>c. Section 553.73, Florida Statutes, relating to the Florida Building Code; or</li> <li>d. Section 633.202, Florida Statutes, relating to the Florida Fire Prevention Code.</li> </ul>

If none of the boxes above are checked, then a Business Impact Estimate <u>IS REQUIRED</u> 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.coi.net/departments/finance/budget/mavor-s-budget-review-committee">https://www.coi.net/departments/finance/budget/mavor-s-budget-review-committee</a>

Division Chief:

(signature)

Prepared By

(signature)

Days 4114125

Date: 4/14/25

## **ADMINISTRATIVE TRANSMITTAL**

10:	MBRC, c/o the Budget Office, St. James Suite 325			
Thru:	Nina Sickle	er, P.E., Director of Pu	ıblic Works	
	Phone:_	255-8748	E-mail:	nsickler@coj.net
From:	Renee Hur	nter, Chief, Real Estat	.9	
	Initiating De	partment Representativ	e (Name, Job T	itie, Department)
	Phone:	255-8700	E-mail:	reneeh@coj.net
Primary	Renee Hur	nter, Chief, Real Estat	<b>e</b>	
Contact	Initiating De	partment Representative	e (Name, Job Ti	itle, Department)
	Phone:	255-8700	E-mail:	renech@coi.net
CC:	Brittany No	rris, Director of Interg	overnmental A	Mairs, Office of the Mayor
	Phone:	255-5000	E-mail:	bnorris@coi.net
<u>COUN</u> To:				CONSTITUTIONAL OFFICER TRANSMITTAL St. James Suite 480
	Phone:	904-255-5074	E-mail: j	sawyer@coj.net
From:				
	Initiating Cou	uncil Member / Independ	dent Agency / C	onstitutional Officer
	Phone:	····	E-mail:	
Primary				
Contact:	(Name, Job	Title, Department)		
			E-mail:	
CC:				ffairs, Office of the Mayor
	Phone:	255-5000	E-mail:	bnorris@coi.net
			_	
Legislati	on from Ind		requires a m	esclution from the Independent Agency Board
approvin	g the legisk	ation.	requires a m	assistion from the marperident Agency Board
approvin Independ	dent Agenc		s No A	ttachment: If yes, attach appropriate documentation. If no, then is board action scheduled?

## FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED