LEGISLATIVE FACT SHEET

DATE:	11/23/21	BT or RC No:	-	2-031
		(Administration & City Co	uncil Bills)	
SPONS	SOR:	Neighborhoods Department/Environmental Q		on
Camban	. 6	V H		
Provide	t for all inquiries and p	resentation: Melissa M. Long Melissa M. Long, P.E.	g, P.E.	
Contact Number:		(904) 255-7101		
	Email Address:	MelissaL@coj.net		
Research v	E: White Paper (Explain Why t will complete this form for Cou Im of 350 words - Maxir	his legislation is necessary? Provide, Who, What, When, Where incil introduced legislation and the Administration is responsible mum of 1 page.)	e, How and the for all other lea	Impact.) Council islation.
Quality Di the State. of the cha Sailboat,	ivision (EQD) has been su . Contract 21191 provides annel on the northeast side located off the ICW at an a	and Wildlife Conservation Commission and the City of Jabritted for the removal and disposal of two derelict vesses for the removal of a white 27' Unknown Make/Model vesses of SR17 bridge in the "O", Reg: Unknown; and a white 2 abandoned property in the 600 block, Reg: Unknown. On disposal. EQD will subcontract the removal and disposal	els from the pr sel, located or 26' Unknown I ace removed,	ublic waters of n the south side Make/Model the vessels will
List the	PRIATION: Total An source name and pro	ovide Object and Subobject Numbers for each o	as follows category lis	
		From:	Amount:	
Name of F	Federal Funding Source(s)	To:	Amount:	=
Name of	State Funding Source(s):	From: Florida Fish and Wildlife Conservation Commission	Amount:	\$30,000.00
Pi.		To: Derelict Vessel Removal Grant	Amount:	\$30,000.00
Name of City of Jacksonville Fundi		From:	Amount:	
		To:	Amount:	
Name of	In-Kind Contribution(s):	From:	Amount:	
маше от ш-кло Соливилоп(s):		To:	Amount:	
Name & Number of Bond		From:	Amount:	
Account(s	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.)

The funding is being provided by the Florida Fish and Wildlife Conservation Commission with no General Fund
contribution. The removal and disposal of derelict vessels will benefit the State, its resources, wildlife, public welfare, and
boater safety and will help restore sensitive marine resources and improve water quality.

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

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ACTION ITEMS: Yes Emergency?	No X	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.
Fiscal Year X		Note: If yes, note must include explanation of all-year subfund carryover language. Funding should be carried forward in an all year's account to ensure that the project is complete and future contracts of this nature are anticipated.
CIP Amendment? Contract / Agreement Approval?	x	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment. 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? The Environmental Quality Division will provide oversight on this project. The contract has been submitted to OGC for review.
Related RC/BT? X Waiver of Code?	X	Attachment: If yes, attach appropriate RC/BT form(s). 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?	х	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.

Rev. 8/2/2016 (CLB RM)

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

ACTION	I ITEMS:	Yes	No				
Co	ontinuation of Grant?	23	х	Is the funding for a	will the funds be used? Does specific time frame and/or m there long-term implications	ıulti-year? İf mu	ılti-year, note
Com	alua Dasa artu						
	plus Property Certification?	<u>a</u>	х	Attachment: If yes,	attach appropriate form(s).		
Reporting X Requirements?				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.			
					Quality Division will provide at the completion of the proje		sary
Division Chief: Melosa M. Long Date: 11/23/2021							
Pre	pared By:	1				Date:	11/23/2021
				(signature)			
			AD	MINISTRATIVE	TRANSMITTAL		
То:	MBRC, c/o Jasmine Jordan, Budget Office, St. James Suite 325						
Thru:	Rachel Zimmer, Director of Intergovernmental Affairs, Office of the Mayor						
	(Name, Job Title	e, Depart	ment)		₩ ,08:		
	Phone:	255-50	06	E-mail: <u>ra</u>	chelz@coj.net		
From:	Bryan Mosier, Director, Neighborhoods Department						
	Initiating Depart	lment Rep	presenta	ative (Name, Job Titl	e, Department)		
	Phone:	255-70	05	E-mail: <u>B</u>	mosier@coj.net		
Primary Contact:				on Chief, Environm	ental Quality Division		
Cornact.	(Name, Job Title		•				
	Phone:	255-71	U1	E-mail: <u>m</u>	elissaL@coj.net	*	
CC:			_		Liaison, Office of the Ma	ayor	
	Phone:	255-50	06	E-mail;	rachelz@coj.net		

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

Peggy Sidman, Office of General Counsel, St. James Suite 480					
Phone: _	904-630-4647	E-mail: psidman@coj.net			
			S4		
Initiating Co	ouncil Member / Indeper	ndent Agency / Constitutional Officer			
Phone:		E-mail:			
(Name, Job	Title, Department)				
Phone: _		E-mail:			
Rachel Zimmer, Intergovernmental Affairs Liaison, Office of the Mayor					
Phone: _	255-5006	E-mail: <u>rachelz@coj.net</u>			
	-	es requires a resolution from the Independent Agency Board	Ŀ		
	Phone:	Phone: 904-630-4647 Initiating Council Member / Indeper Phone: (Name, Job Title, Department) Phone: Rachel Zimmer, Intergoverni Phone: 255-5006	Phone:		

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED