

**LEGISLATIVE FACT SHEET**

DATE: **12/28/2021**

BT or RC No: **BT22-042**

(Administration & City Council Bills)

SPONSOR: **Office of Economic Development**

(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations: **Office of Economic Development**

Provide Name: **Kirk Wendland, Executive Director** Contact No: **255-5455**

Email [kwendland@coj.net](mailto:kwendland@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)

Nateen, a manufacturer of various paper products used in both medical and residential settings, is evaluating the purchase and renovation of an existing industrial building in Northwest Jacksonville. The company currently sells its products in over 80 countries. Nateen is a company that considers itself “eco-friendly”, and only partners with suppliers that provide raw materials from sustainable sources. The Jacksonville facility would become the company’s first U.S. manufacturing facility and serve as its U.S. headquarters.

The company is evaluating approximately 50 new manufacturing jobs in Jacksonville, versus another location in the southeastern U.S. The average wage of the jobs is \$40,000 and the new jobs would be created no later than December 31, 2024. The capital investment for the expansion would be approximately \$5.3 million, for the purchase of new manufacturing equipment and the renovation of an existing manufacturing building in Northwest Jacksonville. Annual payroll of the new jobs is \$2 million, excluding benefits.

The City’s contribution would be a Northwest Large Scale Economic Development Grant in the amount of \$200,000, from the Northwest Jacksonville Economic Development Fund, to help cover the costs related to improvements to an existing industrial building in Northwest Jacksonville. The Company must invest a minimum of \$4 million to qualify for the Grant.

APPROPRIATION: Total Amount Appropriated \$200,000 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 the title of the legislation)

Name of Federal Funding Source(s)

From: \_\_\_\_\_ Amount: \_\_\_\_\_

To: \_\_\_\_\_ Amount: \_\_\_\_\_

Name of State Funding Source(s)

From: \_\_\_\_\_ Amount: \_\_\_\_\_  
To: \_\_\_\_\_ Amount: \_\_\_\_\_

Name of COJ Funding Source(s)

From: Northwest OED Fund / JXSF Citywide Industry Development / Transfer from Fund Balance  
Amount: \$200,000

To: Northwest OED Fund / Northwest JEDC Fund / Subsidies & Contributions To Private Org  
Amount: \$200,000

Name of In-Kind Contributions:

From: \_\_\_\_\_ Amount: \_\_\_\_\_  
To: \_\_\_\_\_ Amount: \_\_\_\_\_

Name & No. 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 ongoing maintenance and staffing obligation? Per Chapter 122 & 106 regarding funding of anticipated post-construction operation costs. (Minimum of 350 words – maximum of 1 page.

The City of Jacksonville proposes to provide a Northwest Large Scale Economic Development Fund Grant in the amount of \$200,000, from the Northwest Jacksonville Economic Development Fund, to help cover the costs related to improvements to an existing industrial building in Northwest Jacksonville. The Company must invest a minimum of \$4 million to qualify for the Grant. This request was approved by Northwest Advisory Committee at their December 14, 2021 meeting. The level of assistance requested is within the City of Jacksonville Public Investment Guidelines for a NW Large Scale Grant. The project has a positive Return On Investment for the City of Jacksonville.

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

ACTION ITEMS:

**Emergency?** Yes \_\_\_\_\_ No **X** \_\_\_\_\_

Justification of Emergency: If yes, explanation must include detailed nature of emergency.

**Federal or State Mandate?** Yes \_\_\_\_\_ No **X** \_\_\_\_\_

Explanation: If yes, explanation must include detailed nature of mandate include Statue or Provision.

**Fiscal Year Carryover?** Yes \_\_\_\_\_ No **X** \_\_\_\_\_

Note: If yes, note must include explanation of all-year subfund carryover language.

**The Northwest Fund (1Cloud Fund 00117) is an all years fund.**

**CIP Amendment?** Yes \_\_\_ No **X** \_\_\_

Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.

**Contract/Agreement Approval?** Yes **X** \_\_\_ No \_\_\_

Attachment & Explanation: If yes, attach the Contract/Agreement & provide name of the Department and include contact name and telephone number of the person r that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed/drafted? **OGC will draft the Agreement and OED will provide oversight and administration.**

**Related RC/BT?** Yes **X** \_\_\_ No \_\_\_ If yes, attach appropriate RC/BT form(s)

**Waiver of Code?** Yes \_\_\_ No **X** \_\_\_

Code Reference: If yes, identify code section(s) in space below & provide detailed explanation (including impacts) within white paper.

**Code Exception:** Yes \_\_\_ No **X** \_\_\_

Code Reference: If yes, identify code section(s) in space below & provide detailed explanation (including impacts) within white paper.

**Related Enacted Ordinances?** Yes \_\_\_ No **X** \_\_\_

Code Reference: If yes, identify related code section(s) and ORD reference number in the space below & provide detailed explanation and any changes necessary within whitepaper.

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

**ACTION ITEMS:**


**Continuation of Grant?** Yes \_\_\_ No **X** \_\_\_

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?** Yes \_\_\_ No **X** \_\_\_ Attachment: If yes, attach appropriate form(s)

**Reporting Requirements?** Yes \_\_\_ No **X** \_\_\_

Explanation: List agencies (including City Council/Auditor) to receive reports and frequency of reports, including when reports are due. Provide name of the Department and include contact name and telephone number of the person responsible for generating.

Executive Director:   
\_\_\_\_\_  
(Signature)

Date: 12/28/2021

Prepared By:   
\_\_\_\_\_  
(Signature)

Date: 12/28/2021

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: N/A  
(Name, Job Title, Department)

From: Kirk Wendland, Executive Director, Office of Economic Development (OED)  
Initiating Department Representative (Name, Job Title, Department)

Phone: 255-5455 E-Mail: kwendland@coj.net

Primary Contact: Ed Randolph, Director Business Development  
(Name, Job Title, Department)

Phone: 255-5450 E-Mail: edr@coj.net

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

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

**COUNCIL MEMBER/INDEPENDENT AGENCY/CONSTITUTIONAL OFFICER TRANSMITTAL**

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

Phone: 255-5055 E-Mail: psidman@coj.net

From: N/A  
Initiating Council Member/Independent Agency/Constitutional Officer

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Primary Contact: N/A  
(Name, Job Title, Department)

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

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

Phone: 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:**

**Board(s) Action/Resolution?** Yes \_\_\_\_\_ No **X** \_\_\_\_\_

Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?

**FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED**