LEGISLATIVE FACT SHEET

DATE:	10/05/22		BT or RC No:			
			(Administration & City Council Bills)			
SPONSOR:		Public Works				
		(Depa	artment/Division/Agency/Council Mem	ber)		
Contact	t for all inquiries and p	resentation:	Robin Smi	th		
Provide	Name:		Robin Smith			
	Contact Number:		255-8710			
	Email Address:	robi	nsmith@coj.net			
Research		ıncil introduced legisla	ssary? Provide; Who, What, When, Where tion and the Administration is responsible			
intersectic Road, Bo Taylor Str the opera	ons, some of which are in towden Road, Spring Park Foreet, Glen Mawr Road, and tion, maintenance, and report of the PRIATION: Total And Park Forest	the City right-of-way load, De Kalb Aven I Merwin Street. Up pair of the improven		ot limited to, portions of Belfort Circle West, Rodney Lane, the City will be responsible for as follows:		
(Name of	Fund as it will appear in ti	tle of legislation)				
Name of F	Federal Funding Source(s)	From:		Amount:		
Tumo or r	cooler anding couloc(s)	То:		Amount:		
Name of	State Funding Source(s):	From:		Amount:		
		То:		Amount:		
Name of	City of Jacksonville Fundir	From:		Amount:		
		То:		Amount:		
Name of	In-Kind Contribution(s):	From:		Amount:		
		То:	_	Amount:		
	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.)

This is a transfer and maintenance agreem	ent with FDOT and will not require funding from COJ.
ACTION ITEMS: Purpose / Check code provisions for each.	List. If "Yes" please provide detail by attaching justification, and
ACTION ITEMS: Yes No Emergency? 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 Carryover?	Note: If yes, note must include explanation of all-year subfund carryover language.
	These are all-years funds.
CIP Amendment? X	Attachment: If yes, attach appropriate CIP form(s). Include justification for
Contract / Agreement Approval?	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?
	Public Works will provide oversight.
	'
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?	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 CONTINUED: Pur	pose / Check List. If "Yes" please provide detail by attaching

justification, and code provisions for each.

ACTION ITEMS:	Yes	No		
Continuation of Grant?	l I	х	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? Reporting Requirements?		x x	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:(Prepared By:			Date: 10/5/2 Date: 10/5/22 (signature)	7

ADMINISTRATIVE TRANSMITTAL

10:	MBRC, c/	o the Budget Office	ce, St. James S	Suite 325				
Thru:	Rachel Zimmer, Director of Intergovernmental Affairs, Office of the Mayor							
	(Name, Job	Title, Department)						
	Phone: _	255-5006	E-mail: _	rachelz@coj.net				
From:	Robin Smith, Chief, Engineering & Construction Management							
	Initiating Department Representative (Name, Job Title, Department)							
	Phone: _	255-8710	E-mail: _	robinsmith@coj.net				
Primary	Robin Smith, Chief, Engineering & Construction Management							
Contact:	(Name, Job	Title, Department)						
	Phone: _	255-8710	E-mail: _	robinsmith@coj.net				
CC:	Rachel Zimmer, Director of Intergovernmental Affairs, Office of the Mayor							
	Phone:	255-5006	E-mail:	rachelz@coj.net				
COUN	CIL MEMB	ER / INDEPENDE	NT AGENCY	CONSTITUTIONAL OFFICER TRANSMITTAL				
To:	Many Staff	ionoulos Office of	Ganaral Coun	cal St. James Suite 490				
То:	•	•		sel, St. James Suite 480				
	•	opoulos, Office of 904-255-5062		sel, St. James Suite 480 astaff@coj.net				
To: From:	Phone:	904-255-5062	E-mail: <u>m</u>	astaff@coj.net				
	Phone:	904-255-5062 uncil Member / Indepe	E-mail: m	astaff@coj.net				
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From: Primary Contact: CC: Legislatic	Phone:	904-255-5062 uncil Member / Indepe Title, Department) mer, Director of Inte 255-5006 ependent Agencie ation.	E-mail: mondent Agency / Constitute E-mail: E-mail: E-mail: E-mail: E-mail:	Affairs, Office of the Mayor rachelz@coj.net esolution from the Independent Agency Board				
From: Primary Contact: CC: Legislatic approvin Independ	Phone:	904-255-5062 uncil Member / Indepe Title, Department) mer, Director of Inte 255-5006 ependent Agencie ation.	E-mail: modent Agency / Constitute E-mail: E-mail: E-mail: E-mail: E-mail: At Modern Agency / Constitute E-mail:	onstitutional Officer Affairs, Office of the Mayor rachelz@coj.net				

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED