## LEGISLATIVE FACT SHEET

DATE:	01/31/23	BT o	r RC No:				
_		(Administration	on & City Council Bills)				
SPONSOR:		Public Works					
		(Department/Division/Agency/C	ouncil Member)				
Contact fo	or all inquiries and p	resentation: F	Robin Smith				
Provide Name:		Robin Smith	Robin Smith				
Contact Number: Email Address:		255-8710					
		robinsmith@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.)  The Public Works Department is requesting to move \$900,000 from Construction to Land Acquisition within the LaSalle Street Outfall project. Additionally, Public Works is requesting legislation necessary to authorize the Mayor to execute the attached Purchase & Sale Agreement in substantially the form attached for the purchase of an approximately 0.12 acre of residential property. The purchase will be used for the construction of the LaSalle Street Pump Station. The City's apprised value for the property is \$460,000.00. The seller would not accept less than \$900,000.00. This property is needed for the completion of the project; therefore, the City agreed to pay the \$900,000.00 counteroffer as a result of anticipated condemnation costs and in the interest of time. This request is being submitted as a one-cycle emergency. Deferral of this transfer until the next CIP would result in the unnecessary delay in the purchase of land and completion of the project.  APPROPRIATION: Total Amount Appropriated \$900,000.00 as follows:  List the source name and provide Object and Subobject Numbers for each category listed below:							
	nd as it will appear in ti eral Funding Source(s)	From:	Amount:				
		То:	Amount:				
Name of Sta	te Funding Source(s):	From:	Amount:				
		То:	Amount:				
Name of City	y of Jacksonville Fundir	From: La Salle Street Outfall Project - Construc	tion Amount:\$900,000.00				
		To: La Salle Street Outfall Project - Land	Amount: \$900,000.00				
Name of In-l	Kind Contribution(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 35)	) words - Maximum of	1 page.)
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This request is to transfer funds that have already been appropriated. It will not cause the City to incur additional debt.						
ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.						
ACTION ITEMS: Yes No Emergency? X	Justification of Emergency: If yes, explanation must include detailed nature of emergency.  Permitting cannot begin until the City owns this property and the seller requires closing to occur shortly.					
Federal or State  Mandate?  X	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.					
Fiscal Year Carryover?  X	Note: If yes, note must include explanation of all-year subfund carryover language.					
CIP Amendment? X 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?  OGC has reviewed and approved the Purchase and Sale Agreement					
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? 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 D						

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

Continuation of	Explanation: How will the funds be used is the funding for a specific time frame a year of grant? Are there long-term impli	and/or multi-year? If multi-year, note
Certification?	Attachment: If yes, attach appropriate for Explanation: List agencies (including Cand frequency of reports, including when (include contact name and telephone number of the contact name and telephone n	ity Council / Auditor) to receive reports n reports are due. Provide Department
Division Chief:	(signature)	Date: 1/31/2023
Prepared By:	(Signature)	Date: 1/31/23

## **ADMINISTRATIVE TRANSMITTAL**

То:	MBRC, c/o the Budget Office, St. James 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:	Steve Long, Director of Public Works					
	Initiating Department Representative (Name, Job Title, Department)					
	Phone: 255-8478	E-mail: _	slong@coj.net			
Primary	Robin Smith, Chief of Engineering & Construction Management					
Contact:	(Name, Job Title, Department)					
	Phone: 255-8710	E-mail:_	robinsmith@coj.net			
CC:	Rachel Zimmer, Director of Intergo	Rachel Zimmer, Director of Intergovernmental Affairs, Office of the Mayor				
	Phone: 255-5006	E-mail: _	rachelz@coj.net			
COUN	CIL MEMBER / INDEPENDENT	AGENCY	CONSTITUTIONAL OFFICER TRANSMITTAL			
То:	Mary Staffopoulos, Office of Ge	noral Coun	peol St. Jamos Suito 490			
10.	Phone: 904-255-5062		nstaff@coj.net			
Erom	T	_				
From:	Initiating Council Member / Independen	nt Agency / C	onetitutional Officer			
		E-mail:				
Б.	Phone:	L-111all				
Primary Contact:						
Comaci.	(Name, Job Title, Department)					
	Phone:	E-mail:				
CC:	Rachel Zimmer, Director of Intergovernmental Affairs, Office of the Mayor					
	Phone: 255-5006	E-mail: _	rachelz@coj.net			
Legislati	on from Independent Agencies r	equires a re	esolution from the Independent Agency Board			
-	g the legislation.	oquii oo u ri	beddien nem ale mospendent Agency Bedra			
	dent Agency Action Item: Yes	No				
•	Boards Action / Resolution?		ttachment: If yes, attach appropriate documentation. If no, then is board action scheduled?			
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