LEGISLATIVE FACT SHEET

DATE:	03/22/23		BT or RC No:	
		(Administration & City Council Bills)		ouncil Bills)
SPONSOR:			Public Works	
		(Depa	rtment/Division/Agency/Council Men	nber)
Contact	for all inquiries and p	resentations	Robin Sm	ith
Provide	·		Robin Smith	
Contact Number:			255-8710	
	Email Address:	robi	nsmith@coj.net	
Research w	: White Paper (Explain Why t vill complete this form for Cou m of 350 words - Maxin	incil introduced legislat	sary? Provide; Who, What, When, Wher ion and the Administration is responsible	e, How and the Impact.) Council for all other legislation.
redevelopi agreemen	ment agreement between t between the two entities	the City of Jackson for approximately 83	n of the Pubic Works Department is ville and the Duval County Fair Asso 2.37 acres at 13611 Normandy Boul n initial term of 40 years, with three t	ciation, Inc., a ground lease evard, and construction of a
List the	PRIATION: Total Ansource name and pro	vide Object and	ed \$0.00 Subobject Numbers for each	as follows: category listed below:
	ederal Funding Source(s)	From:		Amount:
Name of F		То:		Amount:
Name of S	State Funding Source(s):	From:		Amount:
		То:		Amount:
Name of C	City of Jacksonville Fundir	From:		Amount:
		То:		Amount:
	In-Kind Contribution(s):	From:		Amount:
Name of I		То:		Amount:
Account(s	lumber of Bond):	From:		Amount:
		lTo:		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 redevelopment agreement between the City of Jacksonville and the Duval County Fail Association, Inc.							
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.						
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.						
CIP Amendment? X Contract / Agreement X 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? Public Works will provide oversight.						
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: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

ACTION ITEMS: Yes	No		
Continuation of Grant?	х	Explanation: How will the funds be used? Is the funding for a specific time frame and/year of grant? Are there long-term implicat	or multi-year? If multi-year, note
Surplus Property Certification?	x	Attachment: If yes, attach appropriate form	n(s).
Reporting Requirements?	X	Explanation: List agencies (including City of and frequency of reports, including when re (include contact name and telephone number)	eports are due. Provide Department
Division Chief:	1	(signature)	Date: 3/22/23
Prepared By:	2	(Signature)	Date: $3/22/23$

ADMINISTRATIVE TRANSMITTAL

10:	MBHC, 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: <u>rachelz@coj.net</u>					
From:	Robin Smith, Chief, Engineering & Construction Management					
	Initiating Department Representative (Name, Job Title, Department)					
	Phone: 255-8710 E-mail: robinsmith@coj.net					
Primary	· · · · · · · · · · · · · · · · · · ·					
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 MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL					
To:	Mary Staffopoulos, Office of General Counsel, St. James Suite 480					
10.	Phone: 904-255-5062 E-mail: mstaff@coj.net					
_						
From:	Initiating Council Member / Independent Agency / Constitutional Officer					
	Phone: E-mail:					
Primary						
Contact:	(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					
-	on from Independent Agencies requires a resolution from the Independent Agency Board g the legislation.					
Independ	dent Agency Action Item: Yes No					
1	Boards Action / Resolution? Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?					

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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