LEGISLATIVE FACT SHEET

DATE:	09/05/23	BT or RC No:	
		(Administration & City Co	uncil Bills)
SPONS	OR: Planning a	nd Development Department/Development Ser (Department/Division/Agency/Council Mem	
Contact	for all inquiries and p	presentations	
Provide	•	Ellyn Cavin, Chief of Development Servic	es
	Contact Number:	255-8205	
	Email Address:	Ecavin@coj.net	
		this legislation is necessary? Provide; Who, What, When, Where uncil introduced legislation and the Administration is responsible	
The National recognized established policies in National Fexceeds the necessary System at The Feder Requirement (SFHA) to residential the required adopt regulaccessory	s and encourages commend for communities to qual CRS participating commended for communities to qual CRS participating commended in the community of the current class rating. Tal Emergency Managements for Agricultural Structures used for speciments of increased eleval participations that are consister structures that are not la	ram (NFIP) Community Rating System ("CRS") is a volunt anity floodplain management activities, and in 2020, certal ify for or maintain CRS class ratings. Citizens who purchast unities are eligible for premium discounts. The City of Jac and participates in the NFIP's Community Rating System, a requirements of Class 8 and has achieved a CRS rating floodplain management regulations to continue participate and Accessory Structures (the "FEMA Policy"), whice cultural structures and accessory structures within the Spent and promote public health, safety and welfare. The FE fic agriculture purposes and for specific accessory structures and allow wet floodproofing in certain circumstances at with the FEMA Policy to allow issuance of permits for not reger than the certain sizes. There are other technical edits ferences of existing provisions within the floodplain regular	in minimum prerequisites were ase NFIP flood insurance ase NFIP flood insurance ase NFIP flood insurance as NFIP flood insurance as NFIP flood insurance and the City currently of Class 6. Periodically, it is ting in the Community Rating a community Rating in the Community Rating a community Rating a community Rating a community Rating a community Rating in the Com
	PRIATION: Total Arsource name and pro	nount Appropriated N/A ovide Object and Subobject Numbers for each of	as follows: category listed below:
(Name of I	Fund as it will appear in ti	tle of legislation)	
Name of Fe	Federal Funding Source(s)	From:	Amount:
		To:	Amount:
Name of S	state Funding Source(s):	From:	Amount:
reame of State Funding Source(s):		To:	Amount:

Name of City of Jacksonville	From:	Amount:
Funding Source(s):	То:	Amount:
Name of In-Kind Contribution(s):	From:	Amount:
	То:	Amount:
Name & Number of Bond Account(s):	From:	Amount:
	То:	Amount:
Explain: Where are the funds com the funding for a specific time fram 122 & 106 regarding funding of ant (Minimum of 350 words - Maximum o		ne funding require a match? Is ing obligation? Per Chapters
N/A as to funding. Item does not in	clude any appropriations. No adverse impact to the Ci	ty of Jacksonville.
STY	<u> </u>	
ACTION ITEMS: Purpose / code provisions for each.	Check List. If "Yes" please provide detail by a	ittaching justification, and
ACTION ITEMS: Yes Emergency?	No Justification of Emergency: If yes, explanation emergency.	on must include detailed nature of

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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	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement Approval?	X	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?
Related RC/BT?	X	
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?	x	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

s No

Continuation of Grant?	х	Explanation: How will the funds be used? Does the Is the funding for a specific time frame and/or multi-yyear of grant? Are there long-term implications for the specific time frame and/or multi-yyear of grant?	ear? If multi-	year, note
Surplus Property				
Certification? Reporting Requirements?	X	Attachment: If yes, attach appropriate form(s). Explanation: List agencies (including City Council / and frequency of reports, including when reports are (include contact name and telephone number) response.	due. Provide	e Department
Division Chief:	yn(Parin	Date:	9/5/2023
Prepared By: helf	ling.	(signature) (signature)	Date:	9/5/2023

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ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Jessi Xia, Budget Office, St. James Suite 325
Thru:	William B. Killingsworth, Director, Planning and Development Department (Name, Job Title, Department)
	Phone: 255-7811
From:	Ellyn Cavin, Chief, Development Services Division, Planning and Development Department
	Initiating Department Representative (Name, Job Title, Department)
	Phone: 255-8205 E-mail: ecavin@coj.net
Primary	Ellyn Cavin, Chief, Development Services Division, Planning and Development Department
Contact:	(Name, Job Title, Department)
	Phone: 255-8205 E-mail: <u>ecavin@coj.net</u>
CC:	Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
	904-255-5006 E-mail: <u>Bnorris@coj.net</u>
COUN	CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
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То:	Mary Staffopoulos, Office of General Counsel, St. James Suite 480
	Phone: 904-255-5062 E-mail: MStaff@coj.net
From:	
	Initiating Council Member / Independent Agency / Constitutional Officer
	Initiating Council Member / Independent Agency / Constitutional Officer Phone: E-mail:
Primary	Phone: E-mail:
-	Phone: E-mail:
-	Phone: E-mail:
-	Phone: E-mail: (Name, Job Title, Department)
Contact:	Phone: E-mail:
Contact:	Phone: E-mail: (Name, Job Title, Department) Phone: E-mail: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
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Contact: CC: Legislatio	Phone: E-mail: (Name, Job Title, Department) Phone: E-mail: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
Contact: CC: Legislatic	Phone: E-mail:
Contact: CC: Legislatic approving Independent	Phone: E-mail:

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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