LEGISLATIVE FACT SHEET

DATE:	05/23/19	BT or RC No:
		(Administration & City Council Bills)
,		
SPONSOR:	Jacksonville Fire and Re	escue Department
	(1	Department/Division/Agency/Council Member)
Contact for all ir	nquiries and presentations_	Chief Keith Powers
Provide Name:		Chief Keith Powers
Contac	ct Number:	904-630-7873
Email	Address:	kpowers@coj.net
This legislation of City of Jackson October 1, 2019 ladder company JFRD and its as benefit from the Department (JF days a week in a year of the agree in the Consume employees of the effective date of Chapter 633 FS agreement. This	ville and the City of Jackson, if approved. This contrated in Jacksonville Beach fire associated divisions. The City Advanced Life Support and RD). The JFRD shall provaccordance with the agreement and said amount shar Price Index, whichever is the Jacksonville Beach shall the agreement, provided at the agreement, provided at Twenty-eight (28) FTE pass centralized and coordinal provide effective, efficient	ter into a contract for fire protection services between the nville Beach. The effective date would be no sooner than act will place one full time engine company and one full time stations and other ancillary services normally provided by ity of Jacksonville and Jacksonville Beach residents can ad Fire Services offered by the Jacksonville Fire and Rescue vide the services twenty-four (24) hours a day, seven (7) ment. Jacksonville Beach shall pay \$2,220,000 for the first hall be increased by 2.5%, or the annual percentage increase greater, for each year thereafter. All current fire department become employees of the City of Jacksonville on the all certifications/requirements are met as provisioned in the ositions shall be added as shown in Exhibit E of the sted delivery of services throughout the County will benefit to delivery of public safety services to the residents and
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APPROPRIATION: Total Ar List the source <u>name</u> and pro	nount Appropriated \$2,220,000 ovide Object and Subobject Numbers for each	as follows: h category listed below:
(Name of Fund as it will appear in ti		
Name of Foderal Funding Course	From:	Amount:
Name of Federal Funding Source(s)	То:	Amount:
Name of State Funding Source(s):	From:	Amount:
	To:	Amount:
Name of City of Jacksonville Funding Source(s):	From: City of Jacksonville Beach City of Jacksonville - Contract Fire Protection	Amount: \$2,220,000.00
	To: (FRFO011CP)	Amount: \$2,220,000.00
Name of In-Kind Contribution(s):	From:	Amount:
	То:	Amount:
Name & Number of Bond	From:	Amount:
Account(s):	To:	Amount:
106 regarding funding of anticipated (Minimum of 350 words - Maximum of The funds received from Jack Support (ALS) and Fire Servi agreement shall be from its eterminated earlier by either pastations will be performed by grounds maintenance for the the agreement and includes a Fire Stations 60 and 71. The will provide residents and bus		tts of providing Advanced Life County. The term of the wenty (20) years unless rior and exterior of the two fire will provide landscape and tion is outlined in Exhibit C of adder in Jacksonville Beach of fire and rescue services

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

ACTION ITEMS: Yes	No	
Emergency?	х	Justification of Emergency: If yes, explanation must include detailed nature of emergency.
Federal or State Mandate?	×	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.
Fiscal Year		Note: If yes, note must include explanation of all-year subfund carryover
Carryover?	×	language.
		All
CIP Amendment?	×	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid- year amendment.
Contract / Agranment		Attachment & Explanation: If yes, attach the Contract / Agreement and name of
Contract / Agreement X	1 1	Department (and contact name) that will provide oversight. Indicate if
Approval?		negotiations are on-going and with whom. Has OGC reviewed / drafted?
		Interlocal agreement between the City of Jacksonville and City of
•		Jacksonville Beach for Advanced Life Support and Fire Services is
		attached. Oversight Department is Jacksonville Fire and Rescue.
		OGC has reviewed the agreement between the City of
		Jacksonville and Jacksonville Beach.
Related RC/BT? x		Attachment: If yes, attach appropriate RC/BT form(s).
	\vdash	Code Reference: If yes, identify code section(s) in box below and provide
Waiver of Code?	×	detailed explanation (including impacts) within white paper.
Code Exception?	×	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.
Related Enacted		Code Reference: If yes, identify related code section(s) and ordinance reference
Ordinances?		number in the box below and provide detailed explanation and any changes
Ordinances:		necessary within white paper.

Chapter 31, Section 31.201 --- Authorizes this section. The Director of Fire and Rescue may provide fire protection services to adjacent counties, and municipalities located therein, upon request and pursuant to an interlocal agreement approved by

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?	Explanation: How will the funds be used? the funding for a specific time frame and/o grant? Are there long-term implications for	or multi-year? If multi-year, note year of
O		
Surplus Property Certification?	Attachment: If yes, attach appropriate for	
Reporting x Requirements?	Explanation: List agencies (including City and frequency of reports, including when (include contact name and telephone num	reports are due. Provide Department
	Jacksonville shall provide monthly of alarms, response time, and loca	reports on the number and type
	Manager of Jacksonville Beach.	
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Division Chief:	(signature)	Date: 6/18/2019
Dranavad Dru	(signature)	Date: 6/18/19
Prepared By:	(signature)	Date. 4/10/12

ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325		
Thru:	Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor		
	(Name, Job Title, Department)		
	Phone: 630-1825 E-mail: jelsbury@coj.net		
From:	Keith Powers, Interim Director/Fire Chief		
	Initiating Department Representative (Name, Job Title, Department)		
	Phone: 630-7873 E-mail: kpowers@coj.net		
Primary	Keith Powers, Interim Director/Fire Chief		
Contact:	Initiating Department Representative (Name, Job Title, Department)		
	Phone: 630-7873 E-mail: kpowers@coj.net		
CC:	Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor		
	904-630-1825 E-mail: jdelsbury@coj.net		
COUN	NCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL		
Та.	Possey Sidmon Office of Conoral Courses St. James Suite 400		
To:	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647 E-mail: psidman@coj.net		
	2 mail polaman e cojmot		
From:	Initiating Council Morehow / Independent Account (Counting tional Officers		
	Initiating Council Member / Independent Agency / Constitutional Officer Phone: E-mail:		
D :	L-mail.		
Primary Contact:			
Contact.	(Hame, bob Title, Bopartinotty)		
	Phone: E-mail:		
CC:	Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor		
	904-630-1825 E-mail: <u>jelsbury@coj.net</u>		
_	on from Independent Agencies requires a resolution from the Independent Agency Board g the legislation.		
	dent Agency Action Item: Yes No		
E	Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?		

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED