

LEGISLATIVE FACT SHEET

DATE: _____

BT or RC No: _____
(Administration & City Council Bills)

SPONSOR: _____
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation: _____ Duval County Tax Collector's Office

Provide Name: _____ Jim Overton / Debra Doran

Contact Number: _____ 904.630.1464 / 904.630.1838

Email Address: _____ jnoverton@coj.net / ddoran@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 Duval County Tax Collector's Commonwealth branch, located at 6672 Commonwealth Ave, which provides a full range of services, except Concealed Weapon Permits, also includes the majority of our service for commercial vehicles. The landlord, JEA, has communicated their need to regain possession of the leased area and utilize it for their operations. Our office, working with Public Works Real Estate Division, identified suitable space for the relocation of this branch to 8299 West Beaver Street. This legislation will approve 7,475 square feet of space for the branch office and a training facility for a term of 10 years and 6 months (126 months) with two five year renewal options. The first six months of rent are free.

APPROPRIATION: Total Amount Appropriated \$1,022,425.00 as follows:
List the source name and provide Object and Subobject Numbers for each category listed below:

(Name of Fund as it will appear in title of legislation)

Name of Federal Funding Source(s)	From: _____	Amount: _____
	To: _____	Amount: _____
Name of State Funding Source(s)	From: _____	Amount: _____
	To: _____	Amount: _____

Name of City of Jacksonville Funding Source(s).	From: TAX COLLECTOR	Amount: \$1,022,425.00
	To: TAX COLLECTOR	Amount: \$1,022,425.00
Name of In-Kind Contribution(s):	From:	Amount:
	To:	Amount:
Name & Number of Bond Account(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 350 words - Maximum of 1 page.)

The landlord is providing \$270,000 towards the total cost of build out, \$1,292,425. This bill appropriates \$1,022,425 for FFE, IT and other operating expenses for the branch relocation. For FY 2020-2021, the total cost of this lease will be \$0 for six months of rent (April through September).

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

ACTION ITEMS:

Emergency? Yes No

Justification of Emergency: If yes, explanation must include detailed nature of emergency

Federal or State Mandate? Yes No

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.

This lease is for 126 months and includes carryover should the expenditures not be completed.

CIP Amendment?

Attachment: If yes, attach appropriate CIP form(s) Include justification for mid-year amendment.

Contract / Agreement Approval?

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?

See attached draft of lease agreement from OGC.

Related RC/BT?

Attachment: If yes, attach appropriate RC/BT form(s).

Waiver of Code?

Code Reference. If yes, identify code section(s) in box below and provide 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 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?

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?

Attachment: If yes, attach appropriate form(s).

Reporting Requirements?

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

Tax Collector
Division Chief:

Janet DeLeon
(signature)

Date: 8/22/2019

Prepared By:

Debra Doran
(signature)

Date: 8/22/2019

ADMINISTRATIVE TRANSMITTAL

To: MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325

Thru:

(Name, Job Title, Department)

Phone: _____

E-mail: _____

From:

Initiating Department Representative (Name, Job Title, Department)

Phone: _____

E-mail: _____

Primary

Contact:

(Name, Job Title, Department)

Phone: _____

E-mail: _____

CC:

Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor

Phone: 904-630-1825

E-mail: jelsbury@coj.net

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To: Peggy Sidman, Office of General Counsel, St. James Suite 480

Phone: 904-630-4647

E-mail: psidman@coj.net

From:

Jim Overton, Duval County Tax Collector

Initiating Council Member / Independent Agency / Constitutional Officer

Phone: 904-630-1464

E-mail: jnoverton@coj.net

Primary

Contact:

Debra Doran, Chief Financial Officer, Duval County Tax Collector

(Name, Job Title, Department)

Phone: 904-630-1838

E-mail: ddoran@coj.net

CC:

Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor

Phone: 904-630-1825

E-mail: jelsbury@coj.net

Legislation from Independent Agencies requires a resolution from the Independent Agency Board approving the legislation.

Independent Agency Action Item:

Yes

No

Boards Action / Resolution?

Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED