LEGISLATIVE FACT SHEET

DATE:	08/30/19		BT or RC No:	BT19-126
_			(Administration & City Co	uncil Bills)
SPONSO	R: Pub	lic Works/Engine	ering & Construction M	anagement
	*	(Department/Div	vision/Agency/Council Mem	ber)
Contact fo	or all inquiries and present	ation	Robin Smit	th
Provide N	ame:	•	Robin Smith	
(Contact Number:	255-87	10	
ŧ	Email Address:	RobinSmith(@coj.net	
Research will	/hite Paper (Explain Why this legisl complete this form for Council intro of 350 words - Maximum of	duced legislation and the		
will include, utility adjust funding soul of the CIP u	lewalks are needed along the w but is not limited to, site prepara ments, and sidewalk construction ree listed in the reversion of fun- ntil the next annual budget and all will result in the unnecessary	ation, filling in existing on. Once the project i ds section on the fron CIP review will be det	g drainage ditch, installation is completed, any unspent o it page of the BT document. trimental to the best interes	of drainage piping and inlets, dollars shall revert to the Deferral of this amendment

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APPROPRIATION: Total A	mount Appropriatec \$25	55,207.00 as follow	S.
List the source <u>name</u> and pr	ovide Object and Subobject N	lumbers for each category li	isted below:
(Name of Fund as it will appear in	title of legislation) Bay Street Improv	rements- DIA	
Name of Federal Funding Source(s	From:	Amount:	
tamo or reactary arraing course,	, То:	Amount:	
Name of State Funding Source(s):	From:	Amount:	
realing of oldior and hig obtained (b).	То:	Amount:	
Name of City of Jacksonville	General Capital Projects, Auth From: Projects, and Local Option Ga		\$255,207.00
Funding Source(s):	General Capital Projects, Autr To: Projects, and Local Option Ga		\$255,207.00
Name of In-Kind Contribution(s):	From:	Amount:	
Traine of in thing continues in (o).	То:	Amount:	
Name & Number of Bond	From:	Amount:	
Account(s):	To:	Amount:	

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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 reappropriation of existing dollars.	This will not result in the City incurring any additional debt to complete this
project.	
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9	Q.
ACTION ITEMS: Purpose / Check code provisions for each.	List. If "Yes" please provide detail by attaching justification, and
ACTION ITEMS: Yes No	
Emergency? X	Justification of Emergency: If yes, explanation must include detailed nature of
Zinorgonoy: A	emergency.
	,
Federal or State	Evalenction: If we evalenction must include detailed nature of mandate
1 1 2 1	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.
Mandate?^	including Statute of Provision.
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Fiscal Year Carryover?	Note: If yes, note must include explanation of all-year subfund carryover language.
,	Subfunds 143, 32E, 322, and 353 are all-years subfunds
CIP Amendment? 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
Contract / Agreement Approval?	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	Attachment: If yes, attach appropriate RC/BT form(s). Code Reference: If yes, identify code section(s) in box below and provide
Waiver of Code? X	detailed explanation (including impacts) within white paper.
	Code Reference: If yes, identify code in box below and provide detailed
Code Exception? X	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: Per justification, and code provisions f	urpose / Check List. If "Yes" please provide detail by attaching or 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?
	your or granter the distriction grant improduction and distriction and
Surplus Property Certification?	Attachment: If yes, attach appropriate form(s).

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Reportin Requirements	- I I X I	Explanation: List agencies (including and frequency of reports, including when the Department (include contact name and the contact nam	
		9	
Division Chief:	1	(signature)	Date: 9/10/19
Prepared By:	17	(signature)	Date: 9/10/19

			1201
			(4)
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ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325					
Thru:	John P. Pappas, P.E., Director of Public Works					
	(Name, Job Title, Department)					
	Phone: <u>255-8707</u> E-mail: <u>p</u>	appas@coj.net				
From:	Robin Smith, Public Works Engineering Manag	ger				
	Initiating Department Representative (Name, Job T	itle, Department)				
	Phone: <u>255-8710</u> E-mail: <u>R</u>	obinSmith@coj.net				
Primary	- Trobin onling rabile troine anginosing manag	ger				
Contact:	(Name, Job Title, Department)					
	Phone: <u>255-8710</u> E-mail: <u>R</u>	obinSmith@coj.net				
CC:	Jordan Elsbury, Director of Intergovernme	ntal Affairs, Office of the Mayor				
	904-630-1825 E-mail: jelsbury@coj.ne	<u>t</u>				
COUN	NCIL MEMBER / INDEPENDENT AGENCY	CONSTITUTIONAL OFFICER TRANSMITTAL				
To	Boggy Sidmon, Office of Conoral Course	St. James Suite 490				
To:	Peggy Sidman, Office of General Counsel Phone: 904-630-4647 E-mail:	psidman@coj.net				
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From:						
	Initiating Council Member / Independent Agency / C	constitutional Officer				
	Phone: E-mail:					
Primary	•					
Contact:	(Name, Job Title, Department)					
	Phone: E-mail:					
CC:	Jordan Elsbury, Director of Intergovernme	ntal Affairs, Office of the Mayor				
	904-630-1825 E-mail: jelsbury@coj.ne	-				
l amialati	tion from Indonoundant Associate vaccines a	and the frame the Indonesidant Assess Decad				
-	tion from independent Agencies requires a r ring the legislation.	esolution from the Independent Agency Board				
	endent Agency Action Item: Yes No					
-	Boards Action / Resolution?	ttachment: If yes, attach appropriate documentation. If no,				
	w	hen is board action scheduled?				

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED