LEGISLATIVE FACT SHEET

DATE:	10/08/19	BT or RC No:
		(Administration & City Council Bills)
SPONSOR:	Public Works/Real Estate	e/CD2, Councilman Ferraro
	(De	epartment/Division/Agency/Council Member)
Contact for all inc	quiries and presentations	Public Works, Real Estate
Provide Name:		Renee Hunter
Contact	Number:	904-255-8234
Email A	ddress:	reneeh@coj.net
Research will complete		cessary? Provide; Who, What, When, Where, How and the Impact.) Council islation and the Administration is responsible for all other legislation.
Mayor to execute the	attached Purchase & Sale Agre	ty to request legislation necessary for the City Council to authorize the eement (PSA) in substantially the form attached. The agreed upon the parcel is \$740,000.00. The property will be used for a Library.
Please contact me at	255-8234 for more information	
Thank you.		19
RH		
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		×

APPROPRIATION: Total Ar		as follows:
List the source <u>name</u> and pro (Name of Fund as it will appear in t		bers for each category listed below:
(Name of Fund as it will appear in a		
Name of Federal Funding Source(s)	From:	Amount:
	То:	Amount:
Name of State Funding Source(s):	From:	Amount:
Name of State Funding Source(s).	То:	Amount:
Name of City of Independing	From:	Amount
Name of City of Jacksonville Funding Source(s):	The state of the s	Amount:
	То:	Amount:
Name of In-Kind Contribution(s):	From:	Amount:
reality of its raine continuation(s).	То:	Amount:
Name & Number of Bond	From:	Amount:
Account(s):	To:	Amount:
(Minimum of 350 words - Maximum of		
	ome from PWCP32EPB519-065903-PL00	029-02.
7		

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

ACTION ITEMS:	Yes	No_	
Emergency?		×	Justification of Emergency: If yes, explanation must include detailed nature of
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?		х	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement		П	Attachment & Explanation: If yes, attach the Contract / Agreement and name
Approval?	×		of Department (and contact name) that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed / drafted?
1			OGC has drafted and reviewed the Agreement.
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?		х	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	No	
Continuation o Grant		х	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		х	Attachment: If yes, attach appropriate form(s).
Reportinç 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
			,
			+ ///
Division Chief:	Renee	Hunter	
			(s/gwature)
Prepared By:	RJ Mo	orris	(signature) Date: 10/8/19

ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325
Thru:	John P. Pappas, Director, Public Works Department
	(Name, Job Title, Department)
	Phone: 255-8748 E-mail: Pappas@coj.net
From:	Renee Hunter, Chief, Real Estate Division
	Initiating Department Representative (Name, Job Title, Department)
	Phone: 255-8234 E-mail: ReneeH@coj.net
Primary	
Contact:	(Name, cos rine, separation)
	Phone: 255-8705 E-mail: Rmorris@coj.net
CC:	Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor
	904-630-1825 E-mail: <u>JElsbury@coj.net</u>
COUN	CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
To:	Peggy Sidman, Office of General Counsel, St. James Suite 480
	Dhono: 004 620 4647 E mail: naidman@aai.nat
	Phone: 904-630-4647 E-mail: psidman@coj.net
From:	Priorie. 904-650-4647 E-mail. psidman@coj.net
From:	Initiating Council Member / Independent Agency / Constitutional Officer
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Primary Contact: CC: Legislatic	Initiating Council Member / Independent Agency / Constitutional Officer Phone: E-mail: (Name, Job Title, Department) Phone: E-mail: Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor 904-630-1825 E-mail: JElsbury@coj.net on from Independent Agencies requires a resolution from the Independent Agency Board ing the legislation. dent Agency Action Item: Yes No
Primary Contact: CC: Legislatic approvin	Initiating Council Member / Independent Agency / Constitutional Officer Phone: E-mail: (Name, Job Title, Department) Phone: E-mail: Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor 904-630-1825 E-mail: JElsbury@coj.net on from Independent Agencies requires a resolution from the Independent Agency Board ag the legislation.

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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