## **LEGISLATIVE FACT SHEET**

DATE:	10/02/19	BT or RC No: <u>B T 2 0 -</u>	022
		(Administration & City Council Bills)	
SPONS	OR:	Public Works / Public Buildings	
	-	(Department/Division/Agency/Council Member)	
Contact	for all inquiries and present	ations	
Provide	Name:	Roy Birbal	
	Contact Number:	255 - 4330	
	Email Address:	rbirbal@coj.net	
Research w (Minimur The 52 yea Facility fail power whe the next au result in th	rill complete this form for Council introcent of 350 words - Maximum of ar old generator which backs up the led and is no longer serviceable. In utility power, including power to annual budget and CIP review will be unnecessary delay of completing the completing to the service will be unnecessary delay of completing the completing the service will be unnecessary delay of completing the completing the completing the service will be unnecessary delay of completing the completing the service will be considered.	ation is necessary? Provide; Who, What, When, Where, How and the Imp duced legislation and the Administration is responsible for all other legisla 1 page.)  The electrical service in the women's dorm at the Montgomery Corn The generator served as back-up power for the dorm and provide the HVAC system, was disrupted. Deferral of this amendment of the detrimental to the best interest of the community because such go the needed replacement and could potentially cause a costly at it a loss of power for an extended period of time.	rectional ed electrical f the CIP until n deferral will

APPROPRIATION: Total A	mount Appropriated	\$250,000.00	as follows	
List the source <u>name</u> and pre	ovide Object and Subobjec	ct Numbers for each o	category list	ed below:
(Name of Fund as it will appear in t	itle of legislation)			
Name of Federal Funding Source(s	From:		Amount:	
	То:		Amount:	
Name of State Funding Source(s):	From:		Amount:	
	То:		Amount:	
Name of City of Jacksonville	From: COJ	_	Amount:	\$250,000.00
Funding Source(s):	To: COJ		Amount:	\$250,000.00
Name of In-Kind Contribution(s):	From:		Amount:	
,	То:		Amount:	
Name & Number of Bond	From:		Amount:	
Account(s):	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 City will not incur any additional debt be	cause of this transfer.
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ACTION ITEMS: Purpose / Check L code provisions for each.	ist. If "Yes" please provide detail by attaching justification, and
oodo provisiono lei oue	
ACTION ITEMS: Yes No	
Emergency? X	Justification of Emergency: If yes, explanation must include detailed nature of emergency.
	energency.
:	
Federal or State	Explanation: If yes, explanation must include detailed nature of mandate
Mandate? X	including Statute or Provision.
	*

Fiscal Year Carryover?	х	Note: If yes, note must include explanation of all-year subfund carryover language.
,		Subfund 32E is an all-years subfund.
CIP Amendment? X		Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement Approval?	х	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		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?	Х	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.
<u> </u>	<b></b>	
Related Enacted Ordinances?	х	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.
ш,		
ACTION ITEMS CONTINUED justification, and code provision		pose / Check List. If "Yes" please provide detail by attaching each.
ACTION ITEMS: Yes	No	
Continuation of 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?	x	Attachment: If yes, attach appropriate form(s).

Reporting X 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
Division Chief:	(sigprature) Date: <u>/ 8/4/19</u>
Prepared By:	(signature) Date: 10/4/19

## **ADMINISTRATIVE TRANSMITTAL**

То:	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: 255 - 8707 E-mail: <u>pappas@coj.net</u>
From:	Roy Birbal, Chief of Public Buildings
	Initiating Department Representative (Name, Job Title, Department)
	Phone: 255 - 4330 E-mail: rbirbal@coj.net
Primary	Roy Birbal, Chief of Public Buildings
Contact:	(Name, Job Title, Department)
	Phone: 255 - 4330 E-mail: <u>rbirbal@coj.net</u>
CC:	Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor
	904-630-1825 E-mail: Jelsbury@coj.net
COUN	CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
To:	Paggy Sidman, Office of Ganoral Councel, St. James Suito 480
То:	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647 E-mail: psidman@coi.net
	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647 E-mail: psidman@coj.net
To: From:	Phone: 904-630-4647 E-mail: psidman@coj.net
	Phone: 904-630-4647 E-mail: psidman@coj.net  Initiating Council Member / Independent Agency / Constitutional Officer
From:	Phone: 904-630-4647 E-mail: psidman@coj.net
From: Primary	Phone: 904-630-4647 E-mail: psidman@coj.net  Initiating Council Member / Independent Agency / Constitutional Officer  Phone: E-mail:
From: Primary	Phone: 904-630-4647 E-mail: psidman@coj.net  Initiating Council Member / Independent Agency / Constitutional Officer  Phone: E-mail: (Name, Job Title, Department)
From: Primary	Phone: 904-630-4647 E-mail: psidman@coj.net  Initiating Council Member / Independent Agency / Constitutional Officer  Phone: E-mail:
From: Primary	Phone: 904-630-4647 E-mail: psidman@coj.net  Initiating Council Member / Independent Agency / Constitutional Officer  Phone: E-mail: (Name, Job Title, Department)
From: Primary Contact:	Phone: 904-630-4647 E-mail: psidman@coj.net  Initiating Council Member / Independent Agency / Constitutional Officer  Phone: E-mail:   (Name, Job Title, Department)  Phone: E-mail:
From: Primary Contact:	Phone:
From: Primary Contact: CC:	Phone:
From: Primary Contact: CC:	Phone:
From: Primary Contact: CC: Legislatic approvin	Phone: 904-630-4647 E-mail: psidman@coj.net  Initiating Council Member / Independent Agency / Constitutional Officer Phone: E-mail:  (Name, Job Title, Department) Phone: E-mail:  Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor 904-630-1825 E-mail: Jelsbury@coj.net  on from Independent Agencies requires a resolution from the Independent Agency Board g the legislation. dent Agency Action Item: Yes No
From: Primary Contact: CC: Legislatic approvin Independ	Phone:

## **FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED**

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