

LEGISLATIVE FACT SHEET

DATE: 02/26/20

BT or RC No: 20052
(Administration & City Council Bills)

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

Contact for all inquiries and presentations: 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 current tax collection system (aka MVP Tax Manager or Manatron) has reached its end of life and no further updates or upgrades are being made by the vendor, Thomson Reuters. The Tax Collector's Office utilized the City of Jacksonville's Procurement Office's Competitive Sealed Proposal Evaluation Committee (CSPEC) to issue ESC-0254-20 for Tax Collection Management Solution. This RFP was shortlisted and approval was granted for software demonstrations and oral interviews with the two (2) top-ranked firms. Subsequent to the demos and interviews, approval was granted to enter into contract negotiations with the top-ranked firm, Grant Street Group, Inc. On January 16, 2020, CSPEC approved the total estimated award amount not-to-exceed \$4,050,938.28, of which \$600,000 is the capital investment. The initial term includes implementation and five (5) year's annual support with three (3) two (2) year support renewal options. Grant Street Group proved through the RFP response and demo that they are best positioned to meet the needs of the Tax Collector. Their cloud-based solution meets all the requirements mapped by the RFP. Grant Street also has a very intuitive online presence allowing the TC to expand services offered online. In addition, Grant Street provides valuable BI tools that will allow us to make data-driven decisions across all lines of business.

APPROPRIATION: Total Amount Appropriated \$600,000.00 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: \$600,000.00
	To: TAX COLLECTOR	Amount: \$600,000.00
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 funds are being appropriated from interest earnings the Tax Collector receives on deposited funds which benefit all of our recipients (State of Florida, City Of Jacksonville, Duval County School Board, various other taxing authorities, community development and special districts). No matching funds are required. There is ongoing maintenance that is required which will be included in the regular budget submission annually.

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.

It is anticipated these funds will be paid during FY 19/20 but may need to be carried forward to FY 20/21.

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?

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

Division Chief: Debra Doran
(signature)

Date: 2/26/2020

Prepared By: Debra Doran
(signature)

Date: 2/26/2020

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
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: 904-255-5055 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: inoverton@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
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