LEGISLATIVE FACT SHEET

DATE:	03/12/20	BT or RC No:
		(Administration & City Council Bills)
SPONSOR:	Public Works Real Est	tate/CM Michael Boylan, CD 6
		(Department/Division/Agency/Council Member)
Contact for all	inquiries and presentation	Public Works/Real Estate
Provide Name	:	Renee Hunter
Cont	act Number:	904-255-8234
Ema	il Address:	reneeh@coj.net
Research will comp		s necessary? Provide; Who, What, When, Where, How and the Impact.) Council legislation and the Administration is responsible for all other legislation.
abandonment of established in the purposes. The applicant, VC knowing the ease	the drainage and utilities easem Mandarin Meadows Unit 2 Plat Mandarin Senior Housing, Ltd. Ement existed. The Applicant se	ority to request legislation necessary for City Council to approve the ent described in the attached Exhibit A. The subject easement was recorded in Plat Book 29, Page 67. See RE# 159567-0015 for location , constructed an assisted living facility over the easement without eks the City to abandon its easement to establish clear title to the bandonment with encroachment application fee of \$516.00. There were
	n City, State, or Utility agencies.	
If you require ado	litional information, please conta	act RJ Morris at 904-255-8705.

APPROPRIATION: Total Ar		as follows:
	ovide Object and Subobject Numbers for each	category listed below:
(Name of Fund as it will appear in t	tle 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:	Amount:
Funding Source(s):	То:	Amount:
Name of In-Kind Contribution(s):	From:	Amount:
name of m-kind Contribution(s).	То:	Amount:
Name & Number of Bond	From:	Amount:
Account(s):	То:	Amount:
Explain: Where are the funds comithe funding for a specific time frame 122 & 106 regarding funding of anti (Minimum of 350 words - Maximum of The applicant has paid the Easeme	ROPRIATION / FINANCIAL IMPACT / OTHER ng from, going to, how will the funds be used? Does the e? Will there be an ongoing maintenance? and staffing cipated post-construction operation costs. 1 page.) 1 page.) 1 Abandonment with Encroachment Fee of \$516.00, where 00111.152001.349070.000000.000000000000000000000000000	funding require a match? Is g obligation? Per Chapters

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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	s No	
Emergency?	x	Justification of Emergency: If yes, explanation must include detailed nature of emergency.
Federal or State Mandate?	x	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.
Fiscal Year		Note: If yes, note must include explanation of all-year subfund carryover
Carryover?	L×	language.
CIP Amendment? Contract / Agreement Approval?	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 of Department (and contact name) that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed / drafted? Hold Harmless Covenant form approved by OGC.
Related RC/BT?	x	
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?	x	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 No	
Continuation of Grant?	x	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 Requirements?	x	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: Re	nee Hunte	Date: 3/12/200
Division Offici. Ref	ice i luiile	(signature)
Prepared By: R.	J. Morris	(situature) Date: 3//2/2022

ADMINISTRATIVE TRANSMITTAL

То:	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: <u>pappas@coj.net</u>
From:	Renee Hunter, Chief, Real Estate Division
	Initiating Department Representative (Name, Job Title, Department)
	Phone: 255-8234 E-mail: reneeH@coj.net
Primary	RJ Morris, Real Estate and Leasing Manager, Real Estate Division
Contact:	(Name, Job Title, Department)
	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>
COUNC	CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
То:	Peggy Sidman, Office of General Counsel, St. James Suite 480
10.	Phone: 904-630-4647 E-mail: psidman@coj.net
	
From:	Initiating Council Member / Independent Agency / Constitutional Officer
	Phone: E-mail:
Primary	
	(Name, Job Title, Department)
CC:	Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor
	904-630-1825 E-mail: <u>JElsbury@coj.net</u>
_	on from Independent Agencies requires a resolution from the Independent Agency Board
	g the legislation.
-	dent Agency Action Item: Yes No Attachment: If yes, attach appropriate documentation. If no,
E	Boards Action / Resolution? Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED