LEGISLATIVE FACT SHEET

DATE:	04/29/20		BT or RC No: 170-076						
		(Administration & City Council Bills)							
SPONSO	n ₽ ∙	Public Works/Public Buildings							
01 01400	JI1.	(Department/Division/Agency/Council Member)							
			(
Contact 1	for all inquiries and p	resent	ation:		Roy Birba	<u> </u>			
Provide I	Name:	Roy Birbal							
	Contact Number:		25	5-4330					
	Email Address:		<u>rbirba</u>	al@coj.net					
Research wi	White Paper (Explain Why till complete this form for Coun of 350 words - Maxin	uncil intro	duced legislation						
This BT is necessary to appropriate grant funds from the Federal Emergency Management Agency for the purpose of purchasing and installing a permanent generator at the Pre Trial Detention Facility. Funded through the Hazard Mitigation Grant Program and approved by the Florida Division of Emergency Management, this project is for the purchase and installation of an emergency system to reduce and/or mitigate the damage that might otherwise occur from severe weather of other hazards. Deferral of this appropriation would result in the City of Jacksonville not receiving needed grant funds.									
APPROPRIATION: Total Amount Appropriated \$1,370,895.00 as follows: List the source <u>name</u> and provide Object and Subobject Numbers for each category listed below: (Name of Fund as it will appear in title of legislation)									
Name of Fe	ederal Funding Source(s)	From:	Federal Emerge	ncy Management Agend	:у	Amount:	\$1,370,895.00		
		То:	City of Jacksonv	rille		Amount:	\$1,370,895.00		
Name of S	State Funding Source(s):	From:		-		Amount:			
		То:				Amount:			
Name of C	City of Jacksonville Fundir	From:				Amount:			
		То:				Amount:			
Name of In	In-Kind Contribution(s):	From:				Amount:			
		То:				Amount:			
Name & N	umber of Bond	From:				Amount:			
Account(s)):	To:				Amount:			

Page 1 of 4 Rev. 8/2/2016 (CLB RM)

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.)

FEMA has agreed to reimburse up to \$820,847.25 of the project cost for the purchase and installation of a new generator at the Pre Trial Detention Facility.					
ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.					
ACTION ITEMS: Yes 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 Carryover?	Note: If yes, note must include explanation of all-year subfund carryover language.				
CIP Amendment? X 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? Public Works, Public Buildings will provide oversight of the project. OGC has reviewed the request.				
Related RC/BT? X Waiver of Code? X	Attachment: If yes, attach appropriate RC/BT form(s). 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?	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.				

Page 2 of 4 Rev. 8/2/2016 (CLB RM)

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

ACTION	I ITEMS:	Yes	No				
Co	ontinuation o Grant		х	Is the funding for a	a specific time frame and	Does the funding require a match? /or multi-year? If multi-year, note tions for the General Fund?	
	plus Propert	·	X	Attachment: If yes	s, attach appropriate forn	n(s).	
	Certification		H	Explanation: List a	agencies (including City)	Council / Auditor) to receive reports	
Re	Reporting equirements?	~	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 generating			
Divis	ion Chief:	All.	an	776)		Date: 5/4/70	
	yo v	7	1	(signature)			
Division Chief: Date: 5/4/70 Prepared By: Date: 5/4/20							
				(signature)			
			<u>AD</u>	MINISTRATIVE	TRANSMITTAL		
То:	MBRC, c/o	Roselyr	n Chall,	Budget Office, S	St. James Suite 325		
Thru:	Jordan Elsbu	ıry, Dired	ctor of In	tergovernmental A	Affairs, Office of the Ma	ayor	
	(Name, Job Ti	tle, Depa	rtment)				
	Phone:	255-5	013	E-mail: <u>je</u>	elsbury@coj.net	V-1000	
From:	Jordan Elsbu	ıry, Dired	ctor of In	tergovernmental A	Affairs, Office of the Ma	avor	
	Initiating Department Representative (Name, Job Title, Department)						
	Phone:	255-5	013	E-mail: <u>je</u>	elsbury@coj.net		
Primary	Jordan Elsbu	ıry, Dired	ctor of In	tergovernmental A	Affairs, Office of the Ma	ayor	
Contact:	(Name, Job Ti	itle, Depa	rtment)				
	Phone:	255-5	013	E-mail: je	elsbury@coj.net		
CC:	Jordan Elsk	oury, Int	ergover	nmental Affairs	Liaison, Office of the	e Mayor	
	Phone:	255-5	013	F-mail·	ielshurv@coi net		

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To:	Peggy Sic	Peggy Sidman, Office of General Counsel, St. James Suite 480							
	Phone: _	904-630-4647	E-mail: _	psidman@coj.net					
From:	Council Member Ron Salem								
	Initiating Co	Initiating Council Member / Independent Agency / Constitutional Officer							
	Phone: _		E-mail: _						
Primary									
Contact:	(Name, Job	Title, Department)							
	Phone: _		E-mail: _						
CC:	Jordan Ele	Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor							
	Phone: _	904-630-1825	E-mail:	jelsbury@coj.net					
approvin	ng the legisl	lation.	·	resolution from the Independent Agency Board					
•	•	cy Action Item: Yeion / Resolution?		Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?					

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED