LEGISLATIVE FACT SHEET

DATE:	1016/2020	BT or RC No:		
		(Administration & City Council Bills)		
SPONSOR:	Public Works/Real Esta	te/CM Jacoby Pittman, CD 8		
	(0	Department/Division/Agency/Council Member)		
Contact for all inc	quiries and presentations	Renee Hunter		
Provide Name:		Renee Hunter		
Contact	Number:	904-255-8234		
Email A	ddress:	ReneeH@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.)				
Please provide the Real Estate Division with authorization to request legislation for City Council to authorize the Mayor to execute a lease agreement in substantially the same form as the attached. This agreement will provide Jacksonville Sheriff's Office with space for a substation in Zone 6 at the Rutgers Plaza Shopping Center at RE# 044213-0065, within Council District 8. The lease term is for ten (10) years with a total monthly rent amount beginning at six thousand five hundred (\$6,500.00) dollars with an annual escalation rate of 3%. The leased space is approximately 6,000 square feet.				
If additional informati	ion is required, please contact	me at 255-8234 or Wade McArthur at 255-8737.		
Thank you				
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APPROPRIATION: Total Amount Appropriated as follows:					
 ·	ovide Object and Subobject Numbers for ea	ach category listed below:			
(Name of Fund as it will appear in title 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:			
raine of in raine continuation(e).	То:	Amount:			
Name & Number of Bond	From:	Amount:			
Account(s):	То:	Amount:			
(Minimum of 350 words - Maximum of JSO's funding for this lease has been	en appropriated in the FY 21 Budget Ordinance (202	20-504-E), account #			
00111.552101.544990.000000.000	01608.00000.0000000.				
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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?	x	Justification of Emergency: If yes, explanation must include detailed nature of
• •	ш	emergency.
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Federal or State	×	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.
Mandate?		Trictaing Statute of Frovision.
Fiscal Year	_x	Note: If yes, note must include explanation of all-year subfund carryover
Carryover?		language.
CIP Amendment?	×	Attachment: If yes, attach appropriate CIP form(s). Include justification for
	<u> </u>	mid-year amendment. Attachment & Explanation: If yes, attach the Contract / Agreement and name
Contract / Agreement		of Department (and contact name) that will provide oversight. Indicate if
Approval? ^		negotiations are on-going and with whom. Has OGC reviewed / drafted?
		OGC has reviewed and approved the Lease Agreement
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?	×	detailed explanation (including impacts) within white paper.
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Code Exception?	×	Code Reference: If yes, identify code in box below and provide detailed
Codo Excoption:	لــُــا	explanation (including impacts) within white paper.
Related Enacted		Code Reference: If yes, identify related code section(s) and ordinance
Ordinances?	X	reference number in the box below and provide detailed explanation and any changes necessary within white paper.
<u> </u>		
		y.

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?	x	Explanation: How will the funds be used? Does Is the funding for a specific time frame and/or myear of grant? Are there long-term implications	ulti-year? If multi-year, note
Surplus Property Certification?	х	Attachment: If yes, attach appropriate form(s).	
Reporting Requirements?	х	Explanation: List agencies (including City Coun and frequency of reports, including when reports (include contact name and telephone number) r	s are due. Provide Department
Division Chief:	Hute	2	Date: 10/15/2010
Prepared By:	1/1	(signature)	Date: 10/5/2020
		(signature)	

ADMINISTRATIVE TRANSMITTAL

То:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325			
Thru:	John P. Pappas, Director, Public Wor	ks Department		
	(Name, Job Title, Department)	·		
	Phone: 255-8748	E-mail: pappas@coj.net		
From:	Renee Hunter, Chief, Real Estate Division			
	Initiating Department Representative (Nat	me, Job Title, Department)		
	Phone: 255-8234 I	E-mail: ReneeH@coj.net.		
Primary	The date that it is a first point of the property of the state of the			
Contact:	(Name, Job Title, Department)			
	Phone: <u>255-8737</u>	E-mail: wmcarthur@coj.net		
CC:	Leeann Krieg, Director of Intergov	rernmental Affairs, Office of the Mayor		
	904-255-5015 E-mail: <u>LeeannK@coj.net</u>			
COUN	CIL MEMBER / INDEPENDENT A	GENCY / CONSTITUTIONAL OFFICER TRANSMITTAL		
То:	Peggy Sidman, Office of General	Counsel St. James Suite 480		
10.		E-mail: psidman@coj.net		
Eromi				
From:	Initiating Council Member / Independent A	Agency / Constitutional Officer		
	-	E-mail:		
	Phone:	=-man.		
Primary				
Contact.	(Name, Job Title, Department)			
	Phone:	E-mail:		
CC:	Leeann Kreig, Director of Intergov	rernmental Affairs, Office of the Mayor		
	904-255-5015 E-mail: <u>LeeannK</u>	@coj.net		
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	ion from Independent Agencies rea	Hirae a recallition from the Independent Adency Roard		
-	•	uires a resolution from the Independent Agency Board		
approvin	ion from Independent Agencies req ng the legislation. dent Agency Action Item: Yes	No		
approvin Independ	ng the legislation.			

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

Zone 6 Substation – Satellite Aerial



Zone 6 Substation – Street Map Aerial

