## **LEGISLATIVE FACT SHEET**

DATE:	01/11/21	BT or RC No: BT21-037
		(Administration & City Council Bills)
SPONSOR:	Neighborhoo	ods Department / Housing and Community Development Division  (Department/Division/Agency/Council Member)
Contact for all i	nquiries and pre	sentations:
Provide Name:		Thomas Daly, Chief
Conta	ct Number:	255-8204
Email	Address:	tdaly@coj.net
		legislation is necessary? Provide; Who, What, When, Where, How and the Impact.) Council Research ed legislation and the Administration is responsible for all other legislation.
(Minimum of 350		, , ,
This legislation app the City of Jacksor	•	rus Relief Funds (CRF) funding passed-through Florida Housing Finance Corporation to
	th U.S. Congress a	nomic Security Act, also known as the CARES Act, is a \$2 trillion economic stimulus bill nd signed into law by President Donald Trump in March 2020 in response to the economic he United States.
activities such as r have experienced such as new const	ental and mortgage a hardship that pre- ruction may be elig	nding is that it must be spent on activities necessary due to the COVID-19 emergency. So, assistance (and related counseling) payments or emergency repairs for persons who vents them from making these payments are clearly eligible uses. Beyond that, activities lible but would have to be related specifically to a need caused by the COVID-19 posed to and approved by FHFC prior to implementation.
	arty individuals or o	10% for administrative costs as well as a reasonable project delivery cost for services rganizations that perform a required task that local government staff cannot manage in tance.

APPROPRIATION: Total Am	ount Appropriated: \$1,972,	034.00 as follows:	
List the source <u>name</u> and prov	vide Object and Subobject Numbers for e	ach category listed b	elow:
(Name of Fund as it will appear in titl	e of legislation)		
Name of Federal Funding Source(s):	From:	Amount:	
, , ,	То:	Amount:	
Name of State Funding Source(s):	From: Florida Deportment of Economic Opportunity	(334591) Amount:	\$1,972,034.00
3	To: Various Accounts (See BT)	Amount:	\$1,972,034.00
Name of City of Joseph ills	From:	Amount:	
Name of City of Jacksonville Funding Source(s):			
	То:	Amount:	
Name of In-Kind Contribution(s):	From:	Amount:	
	То:	Amount:	
Name & Number of Bond	From:	Amount:	
Account(s):	To	Amount:	

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## 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.)

(William of 550 Words Widelingth of 2 page.)	
The overarching requirement of all funding is that it must be spent on activities necessary due to the COVID-19 emergency. So	),
activities such as rental and mortgage assistance (and related counseling) payments or emergency repairs for persons who have experienced a hardship that prevents them from making these payments are clearly eligible uses. Beyond that, activities	
such as new construction may be eligible but would have to be related specifically to a need caused by the COVID-19	
emergency and would need to be proposed to and approved by FHFC prior to implementation.	
The funds being appropriated within this legislation will be spent for the City's Coronavirus Relief Fund Program.	
There is no match requirement for these funds	
There is no match requirement for these funds.	

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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
,		emergency.
		<sub>ig</sub>
Federal or State		Explanation: If yes, explanation must include detailed nature of mandate
Mandate?		including Statute or Provision.
	. —	
Fig. a.d. V. a.u.	1	
Fiscal Year Carryover?		Note: If yes, note must include explanation of all-year subfund carryover language.
Carryover?		This is an all-years subfund.
		This is an air-years subturiu.
CIP Amendment?		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
Contract / Agreement X	]	Department (and contact name) that will provide oversight. Indicate if
Approval? ^		negotiations are on-going and with whom. Has OGC reviewed / drafted?
		Contract will be overseen by the Housing and Community Development Division
		of the Neighborhoods Department. A draft contract has been provided by the State and is being reviewed by OGC.
		State and to boning to now out by Octo.
	to	
Dalata d DO/DTO	] [	All all and a second of the se
Related RC/BT? x		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.
		detailed explanation (including impacts) within write paper.
<u> </u>	, <del></del>	Ondo Defendance If you identify and in how holes, and movide detailed
Code Exception?		Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.
	,	
	] [	Code Reference: If yes, identify related code section(s) and ordinance reference
Related Enacted		number in the box below and provide detailed explanation and any changes
Ordinances?		necessary within white paper.
	- <del></del>	

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

ACTION ITEMS:	Yes	No			
Continuation Grant		x	Explanation: How will the funds be used? Does the funding recommon for a specific time frame and/or multi-year? If multi-year, note y term implications for the General Fund?		
Surplus Proper Certification Reportin Requirements	)?  g	x x	Explanation: List agencies (including City Council / Aud and frequency of reports, including when reports are du (include contact name and telephone number) responsi	e. Provide	e Department
Division Chief:		Thom		Date:	1/11/2021
Prepared By:	/s/ Lau	ıra Stagn	er Crites	Date:	1/11/2021
		Laura	Stagner (signature)		

## **ADMINISTRATIVE TRANSMITTAL**

То:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325				
Thru:	Bryan Mosier, Director, Neighborhoods Department				
	(Name, Job Title, Department)				
	Phone: 255-8902 E-mail: <u>bmosier@coj.net</u>				
From:	Thomas Daly, Chief, Housing and Community Development Division				
	Initiating Department Representative (Name, Job Title, Department)				
	Phone: 255-8204 E-mail: <u>tdaly@coj.net</u>				
Primary	Thomas Daly, Chief, Housing and Community Development Division				
Contact:	(Name, Job Title, Department)				
	Phone: 255-8204 E-mail: tdaly@coj.net				
CC:	Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor				
	904-255-5013 E-mail: jelsbury@coj.net				
COU	NCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL				
To:	Peggy Sidman, Office of General Counsel, St. James Suite 480				
10.	Phone: 904-630-4647 E-mail: psidman@coj.net				
From:					
1 10111.	Initiating Council Member / Independent Agency / Constitutional Officer				
	Phone:				
Duine	Phone: E-mail:				
Primary Contact:					
Comaci.	(Name, Job Title, Department)				
	Phone: E-mail:				
CC:	Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor				
	904-255-5013 E-mail: jelsbury@coj.net				
Independ	dent Agency Action Item: Yes No				
p	Attachment: If we attach appropriate documentation, If no				
	Boards Action / Resolution? X when is board action scheduled?				

## FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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