## **LEGISLATIVE FACT SHEET**

DATE: November 30, 2011	BT OR RC NUMBER:(Administration Bills)				
SPONSOR (Department/Division/Agency PURPOSE/SUMMARY:	/Council N	Member): Re	ecreation and Comm. Services Dept.		
The Recreation and Community Services Delegislation and to authorize the Mayor to app 316.195 which requires City legislation to al area and cul-de-sac will be constructed by the improvements at the Trout River Pier, a Flor located in Council District 7.	orove and e low angled e Florida I	execute all d I parking on Department	locumentation relating to State Statute a two lane roadway. The parking of Transportation in conjunction with		
APPROPRIATION: Total Amoun	t Appropri	ated: \$	NA as follows:		
(Name of Fund as it will appear in title of	legislation	ı)			
Name of Federal Funding Source:			Amount: \$		
Name of State Funding Source:					
Name of City of Jax Funding Source:			Amount: \$		
Name of In-Kind Contribution Source:			_Amount: \$		
Name of Bond Acct			Amount: \$		
Number					
IMPACT - FINANCIAL/OTHER:					
ACTION ITEMS:					
Emergency? Federal or State Mandates Fiscal Year Carryover? CIP Amendment? Contract/Agreement (C/A) Approval	Yes _X Yes Yes	No No _X No _X	(Attach CIP form)		
Contract/Agreement (C/A) Approval C/A negotiations on-going? Oversight Department Required? Related RC?/BT?	Yes Yes _X_ Yes	No _X No NoX_	Recreation and Community Services (Attach a copy)		
Waiver of Code? Code Exception? Continuation Grant? Surplus Property Certification? Related Enacted Ordinances?	Yes Yes	No_X_ No_X No_X No_X No_X	(Identify Code Provision) (Identify Code Provision)  (Attach a copy) Ord. # of Previous Ord		
Report Required to City Council/Council Auditors					
	168	MOV	Date Frequency		

## **ADMINISTRATION TRANSMITTAL**

To:	MBRC, c/o Roselyn Chall, Budget Division, Suite 325				
CC:	Chris Hand, Chief of Staff Mayor's Office, Fourth Flo	or, City Hall at St. James			
	From: Daryl Joseph Phone: <u>255-7903</u>	Fax: <u>255-7944</u> E-mail: <u>(</u>	djoseph@coj.net		
	Contact person: Daryl Joseph Phone: 255-7903 Fax: 255-7944 E-mail: djoseph@coj.net				
To:		OFFICER TRANSM	······································		
10.	Suite 480, City Hall at St. J	ames (630-4647)	), Office of General Counsel		
From:	(Name, Job Title, Department)				
	Phone:	Fax:	E-mail:		
Contac	ct person:				
	(Name, Job Title	e, Department) Fax:	E-mail:		
Legisla approv	ation from Independent Ager ving the legislation.	ncies requires a resolution	from the Independent Agency Board		

## FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED