

# LEGISLATIVE FACT SHEET

DATE: February 24, 2012

BT OR RC NUMBER: \_\_\_\_\_  
(Administration Bills)

**SPONSOR** (Department/Division/Agency/Council Member): Animal Care & Protective Services

**PURPOSE/SUMMARY:**

Execute a lease with the American Society for the Prevention of Cruelty to Animals (ASPCA) for temporary use of the old Animal Care & Control Shelter located at 2580 West 1<sup>st</sup> Street. The ASPCA will be responsible for improvements to the building and paying all utilities during the tenancy.

**APPROPRIATION:** Total Amount Appropriated: \$ NONE as follows:

(Name of Fund as it will appear in title of legislation) \_\_\_\_\_

Name of Federal Funding Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Name of State Funding Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Name of City of Jax Funding Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Name of In-Kind Contribution Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Name of Bond Acct \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Number \_\_\_\_\_

**IMPACT - FINANCIAL/OTHER:** None

**ACTION ITEMS:**

Emergency?	Yes ___ No <u>x</u>	Justification:___
Federal or State Mandates	Yes ___ No <u>x</u>	
Fiscal Year Carryover?	Yes ___ No <u>x</u>	
CIP Amendment?	Yes ___ No <u>x</u>	(Attach CIP form)
Contract/Agreement (C/A) Approval	Yes <u>x</u> No ___	(Attach a copy only)
C/A negotiations on-going?	Yes ___ No <u>x</u>	
Oversight Department Required?	Yes ___ No <u>x</u>	Name of Dept. _____
Related RC?/BT?	Yes ___ No <u>x</u>	(Attach a copy)
Waiver of Code?	Yes ___ No <u>x</u>	(Identify Code Provision _____)
Code Exception?	Yes ___ No <u>x</u>	(Identify Code Provision _____)
Continuation Grant?	Yes ___ No <u>x</u>	
Surplus Property Certification?	Yes ___ No <u>x</u>	(Attach a copy)
Related Enacted Ordinances?	Yes ___ No <u>x</u>	Ord. # of Previous Ord. _____
Report Required to City Council/Council Auditors	Yes ___ No <u>x</u>	Date _____ Frequency _____

**ADMINISTRATION TRANSMITTAL**

To: MBRC, c/o Kevin Hyde, Chair

CC: Jessica Deal  
Mayor's Office, Fourth Floor, City Hall at St. James

From: Scott Trebatoski, Division Chief, Animal Care & Protective Services  
(Name, Job Title, Department)

Phone: \_255-7371 Fax: \_588-0050 E-mail: \_trebatos@coj.net

Contact person: \_\_\_\_\_ same as above \_\_\_\_\_  
(Name, Job Title, Department)

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

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**COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL  
OFFICER TRANSMITTAL**

To: Steve Rohan (630-1672) or Peggy Sidman (630-4647), Office of General Counsel  
Suite 480, City Hall at St. James

From: \_\_\_\_\_  
(Name, Job Title, Department)

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact person: \_\_\_\_\_  
(Name, Job Title, Department)

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Legislation from Independent Agencies requires a resolution from the Independent Agency Board approving the legislation.

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**FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED**