

LEGISLATIVE FACT SHEET

DATE: 5/1/2012

BT OR RC NUMBER: _____
(Administration Bills)

SPONSOR (Department/Division/Agency/Council Member): Mayors Department / Mayors Administration.

PURPOSE/SUMMARY:

The purpose of this legislation is to obtain a waiver of Ordinance 2010-216-E in order to keep the pledge made by the Mayor not to raise fees on the citizens of Jacksonville.

APPROPRIATION: Total Amount Appropriated: \$ _____ 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:

The waiving of Ordinance 2010-216-E will result in the city forgoing \$445,529.18 of additional revenue that could be raised if the mandated fee increases took effect.

ACTION ITEMS:

Emergency?	Yes ___	No <u>X</u>	Justification: _____
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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 ___	No <u>X</u>	(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 <u>X</u>	No ___	(Identify Code Provision 2010-216E)
Code Exception?	Yes ___	No ___	(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 X Ord. # of Previous Ord. _____
Report Required to City Council/Council Auditors
Yes X No ___ Date _____ Frequency Annually

ADMINISTRATION TRANSMITTAL

To: MBRC, c/o Roselyn Chall, Budget Division, Suite 325

CC: Chris Hand, Chief of Staff
Mayor's Office, Fourth Floor, City Hall at St. James

From: Glenn Hansen, Budget Officer, Finance
(Name, Job Title, Department)

Phone: 904-630-1301 Fax: _____ E-mail: ghansen@coj.net

Contact person: Glenn Hansen, Budget Officer
(Name, Job Title, Department)

Phone: _____ Fax: _____ E-mail: _____

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.

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED