

LEGISLATIVE FACT SHEET

DATE: 5/08/12

BT OR RC NUMBER: 12-083
(Administration Bills)

SPONSOR (Department/Division/Agency/Council Member): ND/EOD/EPB

PURPOSE/SUMMARY: To appropriate funding in the amount of \$25,000 to match Jacksonville Zoo and Garden' funds in the amount of \$25,000 in order for the Zoo to construct a living shoreline project on Zoo property to prevent shoreline erosion, create intertidal habitat, and educate the public.

APPROPRIATION : Total Amount Appropriated: \$ 25,000 as follows:

(Name of Fund as it will appear in title of legislation) Environmental Protection Board Trust Fund

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

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

Name of City of Jax Funding Source: Environmental Protection Board Trust Fund Amount: \$ 25,000

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

Name of Bond Acct _____ Amount: \$ _____

Number _____

IMPACT - FINANCIAL/OTHER: N/A

ACTION ITEMS:

Emergency?	Yes ___ No <u>X</u>	Justification: _____
Federal or State Mandates	Yes ___ No <u>X</u>	
Fiscal Year Carryover?	Yes <u>X</u> No ___	<u>Through FY 2014</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 <u>X</u> No ___	(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 Roselyn Chall, Budget Division, Suite 325

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

From: Vincent A. Seibold, P.E., MBA, Chief, Environmental Quality Division
(Name, Job Title, Department)

Phone: 904-255-7100 Fax: 904-588-0518 E-mail: vseibold@coj.net

Contact person: Vincent A. Seibold, P.E., MBA, Chief, Environmental Quality Division
(Name, Job Title, Department)

Phone: 904-255-7100 Fax: 904-588-0518 E-mail: vseibold@coj.net

**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