

**LEGISLATIVE FACT SHEET**

DATE: August 27, 2012

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

SPONSOR (Department/Division/Agency/Council Member): Department of Public Works/Real Estate Division

PURPOSE/SUMMARY Please provide the Real Estate Division with the authorization to request the legislation necessary for the Mayor to execute a Sovereignty Submerged Lands Lease, BOT No. 160348022 from the Board of Trustees of the Internal Improvement Trust Fund of the State of Florida. The purpose of this Lease is to construct and operate a 5-slip docking facility to be used exclusively for mooring of emergency and rescue vessels in conjunction with an upland municipal fire station located at 9350 Heckscher Drive for a 5 year initial term.

APPROPRIATION : Total Amount Appropriated: \$ \_\_\_\_\_ as follows:

<b>(Name of Fund as it will appear in title of legislation)</b> _____	
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:**

**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 ___ 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 ___ 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 <u>X</u> No ___	Ord. # of Previous Ord. <u>Chapter 122, Part 4, Subpart B</u>
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: John Jones, Acting Real Estate Officer, Public Works  
(Name, Job Title, Department)

Phone: 255-8700 Fax: 255-8948 E-mail: johnj@coj.net

Contact person: Joe Namey, Land Acquisition and Disposition Manager, Department of Public Works  
(Name, Job Title, Department)

Phone: 255-8700 Fax: 255-8948 E-mail: namey@coj.net

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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**

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