## **LEGISLATIVE FACT SHEET**

DATE:7/10/2012	BT OR RC NUMBER:				
			(Administration Bills)		
SPONSOR (Department/Division/Agenc	y/Council I	Member): _	Public Works/Real Estate		
PURPOSE/SUMMARY: The Real Estate Division requests legislation Mayor to execute a lease agreement betw containing the terms spelled out in the attac	een the Cit	y of Jackso	nville and Crown Point Plaza		
This new lease for the Tax Collector is for a l the existing branch operations. The larger s flow and additional services being offered t \$12.13 per square foot is below the current	space is ne to the publi	cessary to c c (i.e. drive	accommodate the increased traffic r licensing). The initial rental rate of		
APPROPRIATION: Total Amou	nt Appropr	riated: \$	N/A as follows:		
(Name of Fund as it will appear in title o	f legislatio	n)			
Name of Federal Funding Source: Name of State Funding Source: Name of City of Jax Funding Source: Name of In-Kind Contribution Source: Name of Bond Acct			Amount: \$ _ Amount: \$ _ Amount: \$		
Number			_		
IMPACT - FINANCIAL/OTHER:					
ACTION ITEMS:					
Emergency? Federal or State Mandates Fiscal Year Carryover?	Yes	No X	Justification:		
CIP Amendment? Contract/Agreement (C/A) Approve	Yes al Yes _X_	No <u>X</u> No	(Attach CIP form)		
C/A negotiations on-going? Oversight Department Required? Related RC?/BT?	Yes Yes Yes	No <u>X</u>			
Waiver of Code? Code Exception?	Yes Yes	No_X No_X	(Identify Code Provision(Identify Code Provision		
Continuation Grant? Surplus Property Certification? Related Enacted Ordinances?	Yes	No <u>X</u> No <u>X</u> No <u>X</u>	_ (Attach a copy) Ord. # of Previous Ord		
Report Required to City Council/C		itors 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, 4 <sup>th</sup> Floor, City Hall at St. James						
From:	m: John M. Jones, Real Estate Manager Senior, Real Estate Division, Public Works (Name, Job Title, Department)						
	Phone:	255-8700	Fax:	255-8948	E-mail:		
Contac	-	(Name, Job Title	e, Department	·)	ublic Works E-mail: rmorris@coj.net		
		9	<u>OFFICE</u>	ER TRANSMI	<del></del>		
To:	Steve Rohan (630-1672) or Peggy Sidman (630-4647), Office of General Counsel Suite 480, City Hall at St. James						
From:	(Name, Job	Fitle, Department)					
	Phone:			Fax:	E-mail:		
Conta	ct person:	(Name, Job Title	a Departmen	t)			
	Phone: _	(Ivalie, Job Titi	•		E-mail:		
	ation from ving the leg		ncies requ	ires a resolution f	From the Independent Agency Board		

## FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED