

LEGISLATIVE FACT SHEET 2013-95

DATE : January 9, 2013

BT or RC NUMBER: _____
(Administration Bills)

SPONSOR (Department/Division/Agency/ Council Member): PW/EN

PURPOSE/ SUMMARY: Provide Proposed Peoples Industries Shipping site with new Railroad Grade Crossing over New Berlin Rd. and New Berlin Ct. Crossing to be constructed and maintained by Developer. No additional funding required from city.

APPROPRIATION: Total Amount Appropriated: \$ N/A as follows:

(Name of Fund as it will appear in title of legislation) S&D 5 Yr Rd. Program

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

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

Name of City of Jax. Funding Source: N/A Amount: \$ _____

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

Name of Bond Acct: _____ Amount: \$ _____

Bond Acct. Number: _____

IMPACT- FINANCIAL/ OTHER: No financial impact – No additional funds required.

ACTION ITEMS:

- | | | | | | |
|--|-----|--------------------------|----|-------------------------------------|---|
| Emergency? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | Justification: |
| Federal or State Mandates | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Fiscal Year Carryover? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| CIP Amendment? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | (Attach CIP form) |
| Contract/ Agreement (C/A) Approval . | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | (Attach a copy only) |
| C/A Negotiations On-going? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Oversight Department Required? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | Name of Dept. _____ |
| Related RC/BT? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | (Attach a copy) |
| Waiver of Code? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | (Identify Code Provision) _____ |
| Code Exception? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | (Identify Code Provision) _____ |
| Continuation of Grant? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | |
| Surplus Property Certification? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | (Attach a copy) |
| Related Enacted Ordinances? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | Ordinance # of previous Ordinance _____ |
| Report Required to City Council/
Council Auditors | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | Date _____ Frequency _____ |

ADMINISTRATIVE TRANSMITTAL

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

Cc: Chris Hand, Chief of Staff, Office of Mayor

From: James M. Robinson, P.E., Director, Public Works Department

(Name, Job Title, Department)

Phone: 255-8707

Fax: 255-8927

E-mail jrobinson@coj.net

Contact person: W. Monroe Hazen, PLS, Manager – Topographical Survey Section

(Name, Job Title, Department)

Phone: 255-8732

Fax: 255-8926

E-mail hazen@coj.net

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

To: 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

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