

LEGISLATIVE FACT SHEET 2013-0134

DATE: January 7, 2013

BT OR RC NUMBER: 13-034
(Administration Bills)

SPONSOR (Department/Division/Agency/Council Member): Neighborhoods/Municipal Code Compliance Division/Mayor's Office

PURPOSE/SUMMARY: To provide funding for nuisance abatement contracting to remove property code violations city-wide

APPROPRIATION : Total Amount Appropriated: \$ 683,590.60 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: Special Fund HNPS1L2NA Amount: \$ 683,590.60

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

Name of Bond Acct _____ Amount: \$ _____

Number _____

IMPACT - FINANCIAL/OTHER: Per Ordinance 2007-286-E, appropriate funds for nuisance abatement/compliance of Chapter 518-Property Safety and Maintenance Code violations. The division requests fiscal year carryover of funds.

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 ___	_____
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 <u>X</u>	No ___	Ord. # of Previous Ord. <u>2007-286-E</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: Jessica Deal
Mayor's Office, Fourth Floor, City Hall at St. James

From: Kimberly Scott, Division Chief, Municipal Code Compliance Division, Neighborhoods
(Name, Job Title, Department)

Phone: 255-7099 Fax: 630-4617 E-mail: kscott@coj.net

Contact person: Kimberly Scott, Division Chief, Municipal Code Compliance Division, Neighborhoods

(Name, Job Title, Department)
Phone: 255-7099 Fax: 630-4617 E-mail: kscott@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