

LEGISLATIVE FACT SHEET

2013-0354

DATE: 05/07/13

BT or RC No: 13-069
(Administration Bills)

SPONSOR: Neighborhoods Department / Housing & Community Development Division
(Department/Division/Agency/Council Member)

PURPOSE/SUMMARY:

To appropriate Community Development Block Grant (CDBG) Entitlements for 1) build-out of five (5) spaces at Northpoint project (Northwest Jacksonville Community Development Corporation), 2) additional Limited Repair Program (LRP) funding for homeowner rehabilitation activities, 3) additional Utility Tap-In Program (UTIP) funding for connections to the City's utility systems 4) funding for the Jacksonville Day Resource Center (Emergency Services Homeless Coalition), and 5) funding for Phase II of the Beaver Street Villas project (Clara White Mission), and to authorize any program income received from loan repayments under the program to be appropriated to eligible CDBG activities for expenditure and used in accordance with the authorized purpose of the program as required by 24 CFR 570.504.

APPROPRIATION: Total Amount Appropriated: \$ 1,826,684.91 as follows:

(Name of Fund as it will appear in title of legislation) Community Development Block Grant Program

Name of Federal Funding Source: US Department of HUD (Program Income) Amount: \$1,826,684.91

Name of State Funding Source: _____ Amount: _____

Name of City of Jax Funding Source: _____ Amount: _____

Name of In-Kind Contribution: _____ Amount: _____

Name of Bond Acct: _____ Amount: _____

Bond Account Number: _____

IMPACT - FINANCIAL / OTHER:

The buildout of five (5) spaces at the Northpoint project (\$400,000) is expected to create fourteen (14) full time jobs and six (6) part time jobs. The Emergency Services Homeless Coalition funding is expected to assist 400 homeless people and reduce misdemeanor arrests of homeless persons in downtown.

ACTION ITEMS:

	Yes	No	
Emergency?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Justification of Emergency:
Federal or State Mandates?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Fiscal Year Carryover?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach CIP Form(s))
Contract / Agreement (C/A) Approval?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach a copy)
C/A Negotiations On-going?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Oversight Department Required?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Name of Dept.: _____
Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(Attach a copy)
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Identify Code: _____
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Identify Code: _____
Continuation of Grant?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Surplus Property Certification?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach a copy)
Related Enacted Ordinances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Ordinance #: _____
Report Required to City Council or Council Auditors?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Date: _____ Frequency: _____

ADMINISTRATIVE TRANSMITTAL

To: MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325

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

From: Elaine D. Spencer, Chief, Housing & Community Development Division

(Name, Job Title, Department)

Phone: 255-8200

E-mail: espencer@coj.net

Contact Laura Stagner, Director - Finance, Housing & Community Development Divisi

Person: (Name, Job Title, Department)

Phone: 255-8279

E-mail: lstagner@coj.net

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To: Peggy Sidman, Office of General Counsel, St. James Suite 480

Phone: 630-4647

E-mail: psidman@coj.net

From: _____

(Name, Job Title, Department)

Phone: _____

E-mail: _____

Contact _____

Person: (Name, Job Title, Department)

Phone: _____

E-mail: _____

Legislation from Independent Agencies require a resolution from the Independent Agency Board approving the legislation.

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED