

LEGISLATIVE FACT SHEET

2014-0187

DATE: 09/16/13

(BT or RC No: 14-009
(Administration Bills))

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

PURPOSE/SUMMARY:

To appropriate \$649.79 of Community Block Grant recaptured funds (program income) to City of Atlantic Beach as funds received from sale of property at 45 Robert Street that was rehabilitated under the City of Atlantic Beach program. These funds will be used for area neighborhood infrastructure projects (004799). The funds is inconjunction with the Interlocal Agreement.

APPROPRIATION: Total Amount Appropriated: \$649.79 as follows:

(Name of Fund as it will appear in title of legislation) <u>Community Development Block Grant</u>	
Name of Federal Funding Source: <u>Community Development Block Grant</u>	Amount: <u>\$649.79</u>
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 - FINANICIAL / OTHER:

Funds will be used for area neighborhood infrastructure project (004799).

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"/>	
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: Terrance Ashanta-Barker, Director, Neighborhoods

(Name, Job Title, Department)

Phone: 255-7248

E-mail: tashanta-barker@coj.net

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

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: Terrance Ashanta-Barker, Director, Neighborhoods

(Name, Job Title, Department)

Phone: 255-7248

E-mail: tashanta-barker@coj.net

TAB

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

Person: (Name, Job Title, Department)

Phone: 255-8279

E-mail: lstagner@coj.net

Legislation from Independent Agencies require a resolution from the Independent Agency Board

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED