

LEGISLATIVE FACT SHEET 2014-306

DATE: 05/07/14

BT or RC No: _____
(Administration Bills)

SPONSOR: Intra-Governmental Services/Procurement
(Department/Division/Agency/Council Member)

PURPOSE/SUMMARY:

The purpose of this request is to submit legislation necessary to revise the Procurement Code, Ch. 126, City Ordinance. The code has not been substantially changed since 2004 and is being revised meet the changing needs of city government, the bidding community and our organizational structure. In addition, the proposed changes will add clarity to our code and create efficiencies through streamlining processes.

APPROPRIATION: Total Amount Appropriated: _____ as follows:

(Name of Fund as it will appear in title of legislation)

Name of Federal Funding Source: <u>N/A</u>	Amount: _____
Name of State Funding Source: <u>N/A</u>	Amount: _____
Name of City of Jax Funding Source: <u>N/A</u>	Amount: _____
Name of In-Kind Contribution: <u>N/A</u>	Amount: _____
Name of Bond Acct: <u>N/A</u>	Amount: _____
Bond Account Number: <u>N/A</u>	

IMPACT - FINANICIAL / OTHER:

There will be no financial impact. The impact will be reflected in the numurous process changes and resulting efficieny and effectiveness with respect to the procurement of goods, services and capital items for the City of Jacksonville.

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 type="checkbox"/>	<input checked="" type="checkbox"/>	
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	
Surplus Property Certification?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach a copy)
Related Enacted Ordinances?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Ordinance #: <u>All previous ordinances related to code revis</u>
Report Required to City Council or Council Auditors?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Date: _____ Frequency: _____