

LEGISLATIVE FACT SHEET

2014-0382

DATE: 05/05/14

BT or RC No: BT14-064
(Administration Bills)

SPONSOR: Planning and Development Department / Community Planning Division
(Department/Division/Agency/Council Member)

PURPOSE/SUMMARY:

To initiate legislation to receive a \$30,000 Artificial Reef Grant from Florida Fish and Wildlife Conservation Commission (FWC) and to receive a \$30,000 donation from the Coastal Conservation Association FLA for the FWC required grant match, to appropriate funds, and to execute the Grant Award Agreement for the deployment of concrete materials for the 2014 St. Johns River Inshore Reefs artificial reef construction project. A CIP Amendment is required.

APPROPRIATION: Total Amount Appropriated: \$60,000.00 as follows:

(Name of Fund as it will appear in title of legislation) 2014 Artificial Reef Grant
Name of Federal Funding Source: _____ Amount: _____
Name of State Funding Source: Florida Fish & Wildlife Conservation Commission Amount: \$30,000.00
Name of City of Jax Funding Source: Donation from Coastal Conservation Association FLA Amount: \$30,000.00
Name of In-Kind Contribution: _____ Amount: _____
Name of Bond Acct: _____ Amount: _____
Bond Account Number: _____

IMPACT - FINANCIAL / OTHER:

No adverse financial impact, and no future costs to be incurred regarding this grant award.

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"/>	_____ (Attach CIP Form(s))
Fiscal Year Carryover?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
CIP Amendment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(Attach a copy)
Contract / Agreement (C/A) Approval?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Name of Dept.: <u>Planning and Development</u>
C/A Negotiations On-going?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach a copy)
Oversight Department Required?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Identify Code: _____
Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Identify Code: _____
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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 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: Calvin L. Burney, Sr., Director, Planning and Development Department

(Name, Job Title, Department)

Phone: 255-7811

E-mail: CalvinB@coj.net

Contact Jody McDaniel, City Planner II, Planning and Development Department

Person: (Name, Job Title, Department)

Phone: 255-7855

E-mail: JodyM@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