

LEGISLATIVE FACT SHEET

2014-0428

DATE: April 10, 2014

BT OR RC NUMBER: 14-061
(Administration Bills)

SPONSOR (Department/Division/Agency/Council Member): JFRD/Emergency Preparedness Division

PURPOSE/SUMMARY: Appropriation of grant funds for the FEMA Severe Repetitive Loss (SRL) Program project to elevate the structure at 5156 Martha Ann Drive, property owners Mr. and Mrs. Gus and Sabrina Roberts for FEMA Project Number SRL-PJ-04-FL-2009-003. ^{additional}
FEMA Project # SRL-PJ-04-FL-2009-003 matching requirements: The 10% of non-Federal matching funds in the amount of \$ 29,559.10 to be furnished by the property owners, Mr. and Mrs. Gus and Sabrina Roberts. 12,163.10 A

APPROPRIATION: Total Amount Appropriated: ~~\$295,591.00~~ as follows: 121,632.00 A

(Name of Fund as it will appear in title of legislation) F.E.M.A. Severe Repetitive Loss (SRL) Program Elevation of Residence at 5156 Martha Ann Drive, Jacksonville.

Name of Federal Funding Source: FEMA Amount: ~~\$266,031.90~~ 109,468.90 A
Name of State Funding Source: _____ Amount: \$ _____
Name of City of Jax Funding Source: _____ Amount: \$ _____
Name of In-Kind Contribution Source: Property Owner Amount: \$ ~~29,559.10~~ 12,163.10 A
Name of Bond Acct _____ Amount: \$ _____
Number _____

IMPACT - FINANCIAL/OTHER: This mitigation grant program provides funding to reduce and/or eliminate the long-term risk of flood damage in the City of Jacksonville floodplain along Little Pottsburg Creek. The project will further reduce claims under the National Flood Insurance Program (NFIP) and supports the City's rating through the Community Rating System (CRS), which was upgraded to a standing of 6. This elevation project is contained within the Duval County Local Mitigation Strategy (LMS) to address the hazard of impacts from flooding associated with tropical storms and hurricanes.

ACTION ITEMS:

Emergency? Yes ___ No X Justification: _____
Federal or State Mandates Yes ___ No X
Fiscal Year Carryover? Yes X No ___
CIP Amendment? Yes ___ No X (Attach CIP form)
Contract/Agreement (C/A) Approval Yes X No ___ (Attach a copy only)
C/A negotiations on-going? Yes ___ No X

Oversight Department Required? Yes No Name of Dept. _____
 Related RC?/BT? Yes No (Attach a copy)
 Waiver of Code? Yes No (Identify Code Provision _____)
 Code Exception? Yes No (Identify Code Provision _____)
 Continuation Grant? Yes No
 Surplus Property Certification? Yes No (Attach a copy)
 Related Enacted Ordinances? Yes No Ord. # of Previous Ord. _____

Report Required to City Council/Council Auditors

Yes No Date _____ Frequency _____

ADMINISTRATION TRANSMITTAL

To: MBRC, c/o Roselyn Chall, Budget Division, Suite 325

CC: Chris Hand, Chief of Policy
 Mayor's Office, Fourth Floor, City Hall at St. James

From: Steven Woodard, Director, JFRD Emergency Preparedness Division
 (Name, Job Title, Department)

Phone: 255-3110 Fax: 630-0600 E-mail: Swoodard@coj.net

Contact person: Laura D'Alisera, Senior Planner, JFRD Emergency Preparedness Division

(Name, Job Title, Department)

Phone: 255-3115 Fax: 630-0600 E-mail: lauraad@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