

LEGISLATIVE FACT SHEET

2014-0526

DATE: 07/07/14

BT or RC No: _____
(Administration Bills)

SPONSOR: Public Works
(Department/Division/Agency/Council Member)

PURPOSE/SUMMARY:

Transfer funds from the Northbank Riverwalk Bulkhead Improvements Project to the Liberty Street Bridge Repair for repairs to the section damaged when a 12 ton crane punched thru the bridge deck. Additionally, funds will be transferred from the St. Johns River Bulkhead project to the Bert Maxwell Bulkhead Improvement Project to place a new steel sheetpile wall in front of the existing failing bulkhead and amend the CIP.

APPROPRIATION: Total Amount Appropriated: \$1,250,000.00 as follows:

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

Name of Federal Funding Source: _____	Amount: _____
Name of State Funding Source: _____	Amount: _____
Name of City of Jax Funding Source: <u>General Capital Projects</u>	Amount: <u>\$1,250,000.00</u>
Name of In-Kind Contribution: _____	Amount: _____
Name of Bond Acct: _____	Amount: _____
Bond Account Number: _____	

IMPACT - FINANCIAL / OTHER:

The collapsed bridge deck on Liberty Street represents a potential safety hazard and needs to be as soon as possible. Bert Maxwell will be to repair an existing failing bulkhead, which will continue to deteriorate if not repaired.

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 checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	Name of Dept.: <u>Public Works</u>
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 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 #: _____
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: James M. Robinson, P.E., Director of Public Works

(Name, Job Title, Department)

Phone: 255-8707

E-mail: jrobinson@coj.net

Contact William J. Joyce, P.E., Chief, Engineering and Construction Management Div

Person: (Name, Job Title, Department)

Phone: 255-8762

E-mail: joyce@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: James M. Robinson, P.E., Director of Public Works

(Name, Job Title, Department)

Phone: 255-8707

E-mail: jrobinson@coj.net

Contact William J. Joyce, P.E., Chief, Engineering and Construction Management Div

Person: (Name, Job Title, Department)

Phone: 255-8762

E-mail: joyce@coj.net

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

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED