

# LEGISLATIVE FACT SHEET

2014-0558

DATE: 05/13/14

BT or RC No: 14-092  
(Administration Bills)

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

## PURPOSE/SUMMARY:

To appropriate \$553,050.51 in accumulated program income to the City's NSP3 Redevelopment strategy and to approve necessary changes to the City's Substantial Amendment document for the Neighborhood Stabilization Program (3).

APPROPRIATION: Total Amount Appropriated: \$ 553,050.51 as follows:

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

Name of Federal Funding Source: U.S. Department of Housing & Urban Development Amount: \$553,050.51

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 - FINANCIAL / OTHER:

The reallocation will allow for the development of new or rehabilitated affordable housing units.


## 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"/>	<input type="text"/>
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: Elaine D. Spencer, Chief, Housing & Community Development Division

(Name, Job Title, Department)

Phone: 255-8200

E-mail: espencer@coj.net

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

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: \_\_\_\_\_

(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.

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**FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED**