

LEGISLATIVE FACT SHEET

2014-0753

DATE: 10/28/14

BT or RC No: BT15011
(Administration Bills)

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

PURPOSE/SUMMARY:

The purpose is to provide additional grant funding for the Timuquan National Preserve Bicycle Touring Route; to authorize the Mayor or his designee and the Corporation Secretary to enter into the agreement with FDOT and amend the CIP.

APPROPRIATION: Total Amount Appropriated: \$52,667.88 as follows:

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

Name of Federal Funding Source: N/A Amount: _____

Name of State Funding Source: FDOT Amount: \$52,667.88

Name of City of Jax Funding Source: _____ Amount: _____

Name of In-Kind Contribution: N/A Amount: _____

Name of Bond Acct: N/A Amount: _____

Bond Account Number: N/A

IMPACT - FINANCIAL / OTHER:

Grant will be used to design and construct the Timuquan National Preserve Bicycle Touring Route Trail.

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 checked="" type="checkbox"/>	<input type="checkbox"/>	(Attach CIP Form(s))
Contract / Agreement (C/A) Approval?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(Attach a copy)
C/A Negotiations On-going?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Name of Dept.: _____
Oversight Department Required?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach a copy)
Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Identify Code: _____
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Identify Code: _____
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: 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