LEGISLATIVE FACT SHEET 2015-0070

DATE: December 30, 2014		BT OR RC I (Administrati	NUMBER: on Bills)	
SPONSOR (Department/Division/Agenc	y/Council	Member): P	ublic Works/ Solid Waste Division	
PURPOSE/SUMMARY: To approve the Certificate of Public Conve Airport's Regulated Garbage Incinerator face		d Necessity (CON) for Jacksonville International	
APPROPRIATION: Total Amount Appr	ropriated:	\$ N/A	as follows:	
(Name of Fund as it will appear in title o	f legislati	on)		
Name of Federal Funding Source:	Amount: \$			
Name of State Funding Source:		Amount: \$		
Name of City of Jax Funding Source:				
Name of In-Kind Contribution Source:				
Name of Bond Acct				
Number				
Number	, , , , , , , , , , , , , , , , , , , 		_	
IMPACT - FINANCIAL/OTHER:				
ACTION ITEMS:				
Emergency?	Yes	No _X	Justification:	
Federal or State Mandates	Yes	No _X		
Fiscal Year Carryover?		No _X_		
CIP Amendment?	Yes	_ No _X_	(Attach CIP form)	
Contract/Agreement (C/A) Approv	al Yes	_ No _X_	(Attach a copy only)	
C/A negotiations on-going?	Yes	_ No _X_		
Oversight Department Required?	Yes	_ No _X_	Name of Dept	
Related RC?/BT?	Yes	_ No_X_	(Attach a copy)	
Waiver of Code?	Yes	_ No_ X_	(Identify Code Provision)	
Code Exception?	Yes	_ No _X_	(Identify Code Provision)	
Continuation Grant?		_ No _X_		
Surplus Property Certification?		_ No_ X_	(Attach a copy)	
Related Enacted Ordinances?		_ No_X_		
Report Required to City Council/Co				
	Yes	_ No _X	Date Frequency	

ADMINISTRATION TRANSMITTAL

To:	MBRC, c/o F	Roselyn Chall, B	ludget Division	, Suite 325						
CC:	Chris Hand, Mayor's Offic	ce. Fourth Floor	, City Hall at S	t. James	7.1.2					
From:	Jeffrey S. For (Name, Job Title,	ster, Chief, Pub Department)	lic Works, Soli	d Waste Divi	sion Juff					
	Phone:255	5-7512	Fax: _	387-8905	É-mail: <u>JSFOSTER@COJ</u>	.NET				
	et person: <u>Eric</u> <u>Division</u>	(Name, Job Title,		ntal Scientist	, Public Works Department, Sol	<u>id</u>				
	Phone: 255-	7513	Fax: <u>387-890</u>	<u>)5</u>	E-mail: EFULLER@CO	.net				
					COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL To: Peggy Sidman (630-4647), Office of General Counsel Suite 480, City Hall at St. James From:					
То:	Peggy Sidma Suite 480, C	<u>C</u> un (630-4647), C ity Hall at St. Ja	OFFICER TO	RANSMIT al Counsel		L				
То:	Peggy Sidma Suite 480, C	in (630-4647), Conty Hall at St. Ja	OFFICER T	RANSMIT al Counsel	TAL					
То:	Peggy Sidma Suite 480, C	in (630-4647), Conty Hall at St. Ja	OFFICER T	RANSMIT al Counsel						
To: From:	Peggy Sidma Suite 480, Control (Name, Job Title Phone:	in (630-4647), Conty Hall at St. Jan, Department)	OFFICER T	RANSMIT al Counsel	TAL					

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED