## LEGISLATIVE FACT SHEET 2015-0167

BT OR RC NUMBER:

**DATE**: <u>2/5/2015</u>

<u> </u>	(Administrat	ion Bills	<u>'</u>
SPONSOR (Department/Division/Agency	/Council Men	nber): <u> </u>	Dept. of Parks, Rec. and Comm Serv.
PURPOSE/SUMMARY: The Parks, Recrequests approval to initiate legislation to ap Harbor Boat Ramp which was previously des \$166,700 and thus requires council approval	prove the use signed using C	of FBIP CIP dollar	dollars for the replacement of the Oars. The anticipated cost of the project
APPROPRIATION: Total Amount Appro	priated: \$		as follows:
Name of Fund as it will appear in title of	legislation) <u>C</u>	<u> Dak Harb</u>	or Boat Ramp Replacement
Name of Federal Funding Source:			Amount: \$
Name of State Funding Source:			Amount: \$
Name of City of Jax Funding Source: RPWF	F1D8		Amount: \$ <u>\$166,700</u>
Name of In-Kind Contribution Source:			Amount: \$
Name of Bond Acct			
Number			
IMPACT - FINANCIAL/OTHER: ACTION ITEMS:			
Emergency?	Yes No		Justification:
	Yes No	O _X	
CIP Amendment? Contract/Agreement (C/A) Approval	Yes No	o _x_ o _x_	(Attach CIP form) (Attach a copy only)
C/A negotiations on-going? Oversight Department Required? Related RC?/BT? Waiver of Code?	Yes No Yes No Yes No	_X	Name of Dept. Parks and Rec (Attach a copy) (Identify Code Provision
Code Exception? Continuation Grant?	***************************************	D_X_ D_X_	(Identify Code Provision) (Identify Code Provision)
Surplus Property Certification? Related Enacted Ordinances? Report Required to City Council/Co	Yes No Yes No uncil Auditors	D_X_ (	(Attach a copy) Ord. # of Previous Ord. No. x Date Frequency

## **ADMINISTRATION TRANSMITTAL**

CC:						
	Ronnie Belton, Financial Services Officer Mayor's Office, Fourth Floor, City Hall at St. James					
From:	n: Tony Lopez, Director, Parks, Recreation and Community Services (Name, Job Title, Department)					
	Phone: 255-7908	Fax: 360-8552	E-mail: ALopez@	coj.net		
Contac	*	ks, Natural and Marin	e Resources, Parks, R	ec and Community Services		
			E-mail: tmeeks@c	oj.net		
(	COUNCII MEM	IRFR / INDFPFN	DENT ACENCY	/ CONSTITUTIONAL		
<b>(</b> To:	Peggy Sidman (630	OFFICER -4647), Office of Gen	TRANSMITTAL	/ CONSTITUTIONAL		
То:	Peggy Sidman (630 Suite 480, City Hall	OFFICER -4647), Office of Gen at St. James	TRANSMITTAL eral Counsel	/ CONSTITUTIONAL		
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То:	Peggy Sidman (630 Suite 480, City Hall (Name, Job Title, Departm	OFFICER -4647), Office of Gen at St. James	TRANSMITTAL eral Counsel	/ CONSTITUTIONAL  E-mail:		
To: From:	Peggy Sidman (630 Suite 480, City Hall (Name, Job Title, Department Phone:	OFFICER -4647), Office of Gen at St. James nent) Fax	TRANSMITTAL eral Counsel			
To: From:	Peggy Sidman (630 Suite 480, City Hall  (Name, Job Title, Departm	OFFICER -4647), Office of Gen at St. James nent) Fax	TRANSMITTAL eral Counsel			
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## FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED