LEGISLATIVE FACT SHEET 2015-0634

DATE : August 11, 2015		BT OR RC NUMBER:(Administration Bills)		
SPONSOR (Department/Division/Agenc	y/Counci	l Member): <u>P</u>	ublic Works/ Solid Waste Division	
PURPOSE/SUMMARY: To approve the Certificate of Public Conver 7544 Philips Highway Clean Debris Process				
APPROPRIATION: Total Amount Appr	opriated:	\$ N/A	as follows:	
(Name of Fund as it will appear in title of	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:	_ Amount: \$			
Name of Bond Acct				
Number				
IMPACT - FINANCIAL/OTHER:				
ACTION ITEMS:				
Emergency?	Yes	No _X	Justification:	
Federal or State Mandates	Yes	NoX		
Fiscal Year Carryover?		_ No _X_		
CIP Amendment?		_ No _X_	(Attach CIP form)	
Contract/Agreement (C/A) Approva			(Attach a copy only)	
C/A negotiations on-going?		_ No _X_		
Oversight Department Required?		_ No _X_	Name of Dept.	
Related RC?/BT?		_ No_X_	(Attach a copy)	
Waiver of Code?		_ No_X_	(Identify Code Provision)	
Code Exception?		_ No _X_	(Identify Code Provision)	
Continuation Grant?		No X	(Attach a comy)	
Surplus Property Certification?		No_X_	(Attach a copy)	
Related Enacted Ordinances? Report Required to City Council/Co		_ No_X_ ditors		
report required to city council ec			Date Frequency	

ADMINISTRATION TRANSMITTAL

То:	MBRC, c/o Roselyn Chall, Budget Division, Suite 325					
CC:	Sam Mousa, Chief Administrative Officer Mayor's Office, Fourth Floor, City Hall at St. James					
From:	Jeffrey S. F (Name, Job Tit	Foster, Chief, I le, Department)	Public Works, Solid Waste Divisi	ion		
	Phone:2	55-7512	Fax: <u>387-8905</u>	E-mail: JSFOSTER@COJ.NET		
	ct person: E		andfill Environmental Scientist, l	Public Works Department, Solid		
		5-7513	Fax: <u>387-8905</u>	E-mail: EFULLER@COJ.net		
То:	Peggy Sidn		OFFICER TRANSMITT), Office of General Counsel	CY / CONSTITUTIONAL <u>'AL</u>		
From:	(Nama, Joh Tit	la Danartmant)				
				E-mail:		
Conta						
	ct person: _					
		(Name, Job Ti	tle, Department) Fax:	E-mail:		

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED