

# LEGISLATIVE FACT SHEET

2015-0665

DATE: 2/18/2015

BT OR RC NUMBER: \_\_\_\_\_  
(Administration Bills)

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

## PURPOSE/SUMMARY:

Seeking authorization for the Mayor to execute the attached Lease Agreement between the City of Jacksonville and Fletcher Medical Supply, Inc., to operate a disabled child care facility.

This proposed five (5) year lease agreement is for the property and improvements located at 641 W 4<sup>th</sup> Street. The initial base rental rate shall be \$8.00 per square foot, with a 3% annual increase starting with the first anniversary of the commencement date. The rental amount shall be determined by applying the rental rate to the 7,500 square feet contained in the subject property's building located on the property. At the end of the first five (5) year term, there will be two (2) options to renew this lease for five (5) years, each.

Prior to commencement, Tenant shall be responsible for replacing the building's roof, installing new flooring in the building, replacing interior ceiling tiles as needed, painting the interior and exterior of the building, repairing the HVAC system as necessary, repairing the water heaters as necessary, cleaning the grounds and repairing the fence surrounding the property. The Public Buildings Division shall approve the reasonable costs associated with these repairs, so said costs can be set off against the monthly base rent beginning at commencement and monthly thereafter until the costs to Tenant has been effectively reimbursed.

Tenant shall be responsible for the ongoing maintenance associated with the property and its improvements while this lease is in effect. Said maintenance items include, but are not limited to routine interior and exterior maintenance such as re-carpeting, repainting, replacement of worn or damaged flooring, the repair of broken or damaged windows, monthly landscaping and repairs or replacement of equipment, including all HVAC units, plumbing & electrical as may be necessary due to normal usage, and replacement of all bulbs, lamps, tubes, and starters.

Tenant shall also be responsible for all janitorial expenses and utilities associated with the subject property.

The subject property, along with some of the surrounding residential properties were acquired by the City of Jacksonville in the early 1990's. The surrounding properties were sold to Habijax for development, and the City built the existing building on the subject property to be operated as a child care facility. In 1993, the City entered into a 20-year lease with the Gateway Nursery and Kindergarten, Inc. for zero (\$0.00) dollars per year. The tenant operated the Gateway Day Care Center until the end of the term (September 30, 2013), at which time they retired.

The Honorable Denise Lee, Council District #8

APPROPRIATION : Total Amount Appropriated: \$ N/A as follows:

(Name of Fund as it will appear in title of legislation) \_\_\_\_\_

Name of Federal Funding Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_  
 Name of State Funding Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_  
 Name of City of Jax Funding Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_  
 Name of In-Kind Contribution Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_  
 Name of Bond Acct: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Number \_\_\_\_\_

**IMPACT - FINANCIAL/OTHER:**

**ACTION ITEMS:**

Emergency?	Yes ___	No <u>X</u>	Justification: _____
Federal or State Mandates	Yes ___	No <u>X</u>	
Fiscal Year Carryover?	Yes ___	No <u>X</u>	_____
CIP Amendment?	Yes ___	No <u>X</u>	(Attach CIP form)
Contract/Agreement (C/A) Approval	Yes <u>X</u>	No ___	(Attach a copy only)
C/A negotiations on-going?	Yes ___	No <u>X</u>	
Oversight Department Required?	Yes ___	No <u>X</u>	Name of Dept. _____
Related RC?/BT?	Yes ___	No <u>X</u>	(Attach a copy)
Waiver of Code?	Yes ___	No <u>X</u>	(Identify Code Provision _____)
Code Exception?	Yes ___	No <u>X</u>	(Identify Code Provision _____)
Continuation Grant?	Yes ___	No <u>X</u>	
Surplus Property Certification?	Yes ___	No <u>X</u>	(Attach a copy)
Related Enacted Ordinances?	Yes ___	No <u>X</u>	Ord. # of Previous Ord. _____
Report Required to City Council/Council Auditors	Yes ___	No <u>X</u>	Date _____ Frequency _____

**ADMINISTRATION TRANSMITTAL**

To: MBRC, c/o Roselyn Chall, Budget Division, Suite 325

CC: Chris Hand, Chief of Staff  
 Mayor's Office, Fourth Floor, City Hall at St. James

From: John Jones, Esq., Real Estate Division, Department of Public Works  
 (Name, Job Title, Department)

Phone: 255-8700 Fax: 255-8948 E-mail: johnj@coj.net

Contact person: RJ Morris, AMIO, Real Estate Division, Department of Public Works  
 (Name, Job Title, Department)

Phone: 255-8705 Fax: 255-8948 E-mail: rmorris@coj.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: \_\_\_\_\_  
(Name, Job Title, Department)

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact person: \_\_\_\_\_  
(Name, Job Title, Department)

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Legislation from Independent Agencies requires a resolution from the Independent Agency Board approving the legislation.

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