

**LEGISLATIVE FACT SHEET**

2015-0741

DATE: 09/15/15

BT or RC No: BT15-110  
(Administration Bills)

SPONSOR: Jacksonville Fire and Rescue Department/Fire Operations  
(Department/Division/Agency/Council Member)

**PURPOSE/SUMMARY:**

Appropriate proceeds from the Wells Fargo land donation located at 1450 Hickman Rd. behind Station #20 on 1443 Huffingham Lane. Proceeds will be used to clear the buildings, grade the property and install fencing to provide additional parking and storage at the Fire Station.

APPROPRIATION: Total Amount Appropriated: \$16,853.42 as follows:

(Name of Fund as it will appear in title of legislation) Fire Station #20 (Renovation)

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: \_\_\_\_\_ Amount: \_\_\_\_\_  
 Name of Bond Acct: \_\_\_\_\_ Amount: \_\_\_\_\_  
 Bond Account Number: \_\_\_\_\_

**IMPACT - FINANICIAL / OTHER:**

Property donated by Wells Fargo as part of their REO Donation program is designed to facilitate the transfer of Wells Fargo owned properties to local municipalities in an effort to stabilize neighborhoods and prevent blight. Seller concessions of \$16,853.42 will be used to demolish structures and provide additional parking and storage for Fire Station #20 located at 1443 Huffingham Lane.

**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"/>	
Fiscal Year Carryover?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
CIP Amendment?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Contract / Agreement (C/A) Approval?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach a copy)
C/A Negotiations On-going?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Oversight Department Required?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Name of Dept.: _____
Related RC/BT?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach a copy)
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Identify Code: _____
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Identify Code: _____
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: Sam Mousa, Chief Administrative Officer, Mayor's Office

From: Kurtis Wilson, Chief of the Department, Fire and Rescue

(Name, Job Title, Department)

Phone: 630-7868

E-mail: kwilson@coj.net

Contact Keith Powers

Person: (Name, Job Title, Department)

Phone: 630-7871

E-mail: kpowers@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: \_\_\_\_\_

(Name, Job Title, Department)

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Contact \_\_\_\_\_

Person: (Name, Job Title, Department)

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

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