

LEGISLATIVE FACT SHEET

DATE: 01/26/16

BT or RC No: _____
(Administration Bills)

SPONSOR: Public Works/Real Estate Division/Reggie Gaffney, Council District 7
(Department/Division/Agency/Council Member)

PURPOSE/SUMMARY:

The Real Estate Division is requesting the authorization to request the legislation necessary for the Mayor to execute a Sovereignty Submerged Lands Lease Renewal (BOT 160338992) from the Board of Trustees of the Internal Improvement Trust Fund of the State of Florida. This Lease is for the Shipyard Public Pier used exclusively for passive recreation activity and is in conjunction with an upland city development for the public.

APPROPRIATION: Total Amount Appropriated: _____ as follows:

(Name of Fund as it will appear in title of legislation) N/A

Name of Federal Funding Source: N/A Amount: _____

Name of State Funding Source: N/A Amount: _____

Name of City of Jax Funding Source: N/A Amount: _____

Name of In-Kind Contribution: N/A Amount: _____

Name of Bond Acct: N/A Amount: _____

Bond Account Number: N/A

IMPACT - FINANCIAL / OTHER:

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 type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach CIP Form(s))
Contract / Agreement (C/A) Approval?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(Attach a copy)
C/A Negotiations On-going?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Oversight Department Required?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Name of Dept.: <u>Public Works/Real Estate Division</u>
Related RC/BT?	<input 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 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: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor

From: Stephanie Burch, Acting Chief, Real Estate Division

(Name, Job Title, Department)

Phone: 255-8902

E-mail: stephanieb@coj.net

Contact Scarlet Zaher, Executive Secretary, Public Works/Real Estate Division

Person: (Name, Job Title, Department)

Phone: 255-8700

E-mail: zaher@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.

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED