

## LEGISLATIVE FACT SHEET

DATE: 04/05/16

BT or RC No: \_\_\_\_\_  
(Administration Bills)

SPONSOR: Public Works/Engineering & Construction Management Division  
(Department/Division/Agency/Council Member)

**PURPOSE/SUMMARY:**

Authorize the Mayor to execute the Interlocal Agreement for Allocation and Implementation of National Pollutant Discharge Elimination System Program Requirements (NPDES). This agreement will replace the previous agreement for the MS4 permit requirements for Cycle 3 to reflect the most recent MS4 Permit requirements, identified as Cycle 4. The State's participation over the 5 year term of the agreement will be \$1,900,171.00.

APPROPRIATION: Total Amount Appropriated: \$0.00 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: \_\_\_\_\_ Amount: \_\_\_\_\_

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

Bond Account Number: \_\_\_\_\_

**IMPACT - FINANCIAL / OTHER:**

The State holds a NPDES Municipal Separate Storm Sewer System Phase 1 Permit which includes a monitoring plan (MS4 permit). This agreement ensures that the responsibilities associated with the COJ/FDOT MS4 permit are updated to meet the Cycle 4 requirements and to ensure appropriate financial responsibilities are addressed.

**ACTION ITEMS:**

	Yes	No	
Emergency?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Justification of Emergency: _____
Federal or State Mandates?	<input type="checkbox"/>	<input type="checkbox"/>	
Fiscal Year Carryover?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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</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 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: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor

From: John P. Pappas, P.E. Director of Public Works

(Name, Job Title, Department)

Phone: 255-8707

E-mail: pappas@coj.net

Contact Thomas Fallin, P.E. Chief, Engineering and Construction Management

Person: (Name, Job Title, Department)

Phone: 255-8710

E-mail: thomasf@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: John P. Pappas, P.E. Director of Public Works

(Name, Job Title, Department)

Phone: 255-8707

E-mail: pappas@coj.net

Contact Thomas Fallin, P.E. Chief, Engineering and Construction Management

Person: (Name, Job Title, Department)

Phone: 255-8710

E-mail: thomasf@coj.net

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**