LEGISLATIVE FACT SHEET

DATE:	05/18/16		BT or RC No:	
			(Administration E	Bills)
SPONSOR:	Public Works/ Real E		on/Danny Becton, Coucil D	
		(Departmer	nt/Division/Agency/Council Memb	oer)
PURPOSE/S	SUMMARY:			
the closure and	d abandonment of a portion of th	ne right-of-way	uest the legislation necessary for of Nurseryfields Drive, establish closed contains 4763 square fe	ned in Plat Book 57, Page 17,
of-way. This se Accordingly, an	ection of the right-of-way is unop	pened and unit reserved in the	ripal and Utility Agencies which r mproved but contains drainage i e name of the City of Jacksonvill ay.	nfrastructure and JEA facilities.
	i is made by Galleria Club Renta ea. The applicant has paid the \$		LLC. The applicant will use the lication fee.	closed right-of-way as a
Maps and draw	rings are enclosed for your refer	ence.		
If you require a	dditional information, please cal	II Jim Morgan	at 904-255-8737.	ļ
,	, p			
		<u></u>		
APPROPRI <i>A</i>	ATION: Total Amount Ap	propriated:		as follows:
(Name of Fund	as it will appear in title of legisla	ation) N/A		_
· Name of Federa	al 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 N				
		· · · · · · · · · · · · · · · · · · ·		_
IMPACT - FI	NANICIAL / OTHER:			
				
ACTION ITE	MS:	Yes No		
Emergency	·	x	Justification of Emergency:	
	State Mandates?	x		
Fiscal Year	r Carryover?	x		
CIP Amend	dment?	x	(Attach CIP Form(s))	
	Agreement (C/A) Approval?	x	(Attach a copy)	
·=	iations On-going?	x		
Oversight [Department Required?	x	Name of Dept.:	

Related RC/BT?	х	(Attach a copy)	
Waiver of Code?	х	Identify Code:	
Code Exception?	х	Identify Code:	
Continuation of Grant?	 х		
Surplus Property Certification?	х	(Attach a copy)	
Related Enacted Ordinances?	х	Ordinance #:	
Report Required to City Council or	х		
Council Auditors?	 	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, Esq., Chief, ReaL Estate Division, Public Works					
	(Name, Job Title, Department)					
	Phone: 255-8700 E-mail: <u>StephanieB@coj.net</u>					
Contact	Jim Morgan, Land Manage Agent Senior, Public Works					
Person	(Name, Job Title, Department)					
	Phone: 255-8737 E-mail: <u>Morgan@coj.net</u>					
COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL						
То:	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:					
_	on from Independent Agencies require a resolution from the Independent Agency Board g the legislation.					

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED