

LEGISLATIVE FACT SHEET

DATE: 09/23/16

BT or RC No: N/A
(Administration & City Council Bills)

SPONSOR: Planning and Development Department - Community Planning Division
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations: Maurice Postal, Brownfields Coordinator

Provide Name: Maurice Postal, Brownfields Coordinator

Contact Number: 255-7810

Email Address: mpostal@coj.net

PURPOSE: White Paper (Explain Why this legislation is necessary? Provide; Who, What, When, Where, How and the Impact.) Council Research will complete this form for Council introduced legislation and the Administration is responsible for all other legislation.

(Minimum of 350 words - Maximum of 1 page.)

The owners of the adjoining parcels at 3946 and 4000 St. Johns Avenue, Jacksonville FL 32205 are requesting that the site be designated as a Brownfield Area. CRP/Chance Jacksonville Owner, L.L.C. is the owner of 4000 St. Johns Avenue, Jacksonville, FL 32205 (R.E. #092941-0000). CRP/Chance Jacksonville Owner II, L.L.C. is the owner of 3946 St. Johns Avenue, Jacksonville, FL 32205 (R.E. #092703-0000). Section 376.80, F.S., requires that areas outside of a community redevelopment area, Enterprise Zone, Empowerment Zone, closed military base or designated brownfield pilot project area be designated as a Brownfield Area by local government Resolution. Sampling has confirmed the presence of various contaminants including tetrachloroethylene, dieldrin, naphthalene, arsenic, and benzopyrene. The site has previously contained a fueling station, hardware store, extermination business, and dry cleaner. Following enactment of the legislation approving the designation, the owners will negotiate a Brownfield Site Rehabilitation Agreement (BSRA) with FDEP. The owners are pursuing the Brownfield Area designation and BSRA in order to benefit from the State of Florida's Voluntary Clean Up Tax Credit Program (VCTC). The VCTC will allow the site owners to receive a 50% State corporate income tax credit for cleanup costs. The owners has spent approximately \$50,000 to date on assessments related to a future cleanup. The owners are currently in negotiation with the Florida Department of Environmental Protection to determine the actions required for cleanup. The owners have met all of the five criteria for a Brownfield Area designation listed in Section 376.80(2)(c), F.S., except for having the proposed redevelopment of the site be consistent with the Comprehensive Plan and land development regulations. The 5.8 acre site currently contains the Commander Apartments building and St. Johns Village shopping plaza. The owners are proposing to renovate the Commander Apartments building, demolish the current commercial buildings, and to add additional residential units and a parking structure. The owners have submitted an application for a small scale land use amendment (2016C-020) on 6/2/2016 and an application for rezoning to PUD (2016-0561) on 7/13/2016. The final Council hearing and vote for both the land use and zoning bills is scheduled to be on October 11, pending any deferrals. The owners will be in compliance with all of the requirements of Section 376.80(2)(c), F.S., after approval of the proposed land use and zoning changes.

APPROPRIATION: Total Amount Appropriated N/A as follows:
 List the source **name** and provide Object and Subobject Numbers for each category listed below:

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

| | | |
|-----------------------------------|-------------|---------------|
| Name of Federal Funding Source(s) | From: _____ | Amount: _____ |
| | To: _____ | Amount: _____ |

| | | |
|----------------------------------|-------------|---------------|
| Name of State Funding Source(s): | From: _____ | Amount: _____ |
| | To: _____ | Amount: _____ |

| | | |
|---|-------------|---------------|
| Name of City of Jacksonville Funding Source(s): | From: _____ | Amount: _____ |
| | To: _____ | Amount: _____ |

| | | |
|----------------------------------|-------------|---------------|
| Name of In-Kind Contribution(s): | From: _____ | Amount: _____ |
| | To: _____ | Amount: _____ |

| | | |
|-----------------------------------|-------------|---------------|
| Name & Number of Bond Account(s): | From: _____ | Amount: _____ |
| | To: _____ | Amount: _____ |

PLAIN LANGUAGE OF APPROPRIATION / FINANCIAL IMPACT / OTHER:

Explain: Where are the funds coming from, going to, how will the funds be used? Does the funding require a match? Is the funding for a specific time frame? Will there be an ongoing maintenance? ... and staffing obligation? Per Chapters 122 & 106 regarding funding of anticipated post-construction operation costs.

(Minimum of 350 words - Maximum of 1 page.)

The proposed legislation will have no financial impact on the City of Jacksonville.

ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

| ACTION ITEMS: | Yes | No | |
|--------------------------------|--------------------------|-------------------------------------|---|
| Emergency? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Justification of Emergency: If yes, explanation must include detailed nature of emergency. |
| Federal or State Mandate? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision. |
| Fiscal Year Carryover? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Note: If yes, note must include explanation of all-year subfund carryover language. |
| CIP Amendment? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment. |
| Contract / Agreement Approval? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Attachment & Explanation: If yes, attach the Contract / Agreement and name of Department (and contact name) that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed / drafted? |
| Related RC/BT? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Attachment: If yes, attach appropriate RC/BT form(s). |
| Waiver of Code? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper. |
| Code Exception? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper. |
| Related Enacted Ordinances? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Code Reference: If yes, identify related code section(s) and ordinance reference number in the box below and provide detailed explanation and any changes necessary within white paper. |

ACTION ITEMS:

| | Yes | No |
|---------------------------------|-----|----|
| Continuation of Grant? | | x |
| Surplus Property Certification? | | x |
| Reporting Requirements? | x | |

Explanation: How will the funds be used? Does the funding require a match? Is the funding for a specific time frame and/or multi-year? If multi-year, note year of grant? Are there long-term implications for the General Fund?

Attachment: If yes, attach appropriate form(s).

Explanation: List agencies (including City Council / Auditor) to receive reports and frequency of reports, including when reports are due. Provide Department (include contact name and telephone number) responsible for generating

A copy of the signed Resolution must be filed with the Florida Department of Environmental Protection, DoD and Brownfields Partnerships Office, after passage of the legislation.

Division Chief: _____
(signature)

Date: _____

Prepared By: _____
(signature)

Date: _____

ADMINISTRATIVE TRANSMITTAL

To: MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325

Thru: Kristen Reed, Chief of Community Planning

(Name, Job Title, Department)

Phone: 255-7837

E-mail: kreed@coj.net

From: Maurice Postal, Brownfields Coordinator

Initiating Department Representative (Name, Job Title, Department)

Phone: 255-7810

E-mail: mpostal@coj.net

Primary Contact: Maurice Postal, Brownfields Coordinator

(Name, Job Title, Department)

Phone: 255-7810

E-mail: mpostal@coj.net

CC: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor
904-630-1825 E-mail: akshelton@coj.net

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To: Peggy Sidman, Office of General Counsel, St. James Suite 480

Phone: 904-630-4647

E-mail: psidman@coj.net

From: _____

Initiating Council Member / Independent Agency / Constitutional Officer

Phone: _____

E-mail: _____

Primary Contact: _____

(Name, Job Title, Department)

Phone: _____

E-mail: _____

CC: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor
904-630-1825 E-mail: akshelton@coj.net

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

Independent Agency Action Item: Yes No

Boards Action / Resolution?

Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED