

# LEGISLATIVE FACT SHEET

DATE: 09/26/16

BT or ~~RC~~ No: BT17-015

(Administration & City Council Bills)

SPONSOR: Office of the Sheriff

(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations: William Clement

Provide Name: William Clement

Contact Number: 630-2217

Email Address: [william.clement@jaxsheriff.org](mailto:william.clement@jaxsheriff.org)

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.)

This legislation is necessary to appropriate \$80,074 from the U.S. Department of Homeland Security/FEMA via passthrough from the Florida Division of Emergency Management.

The grant period is from 10/01/2016 through 12/31/2017.

The funds will be used to purchase specialized equipment and to do repairs/upgrades to existing specialized equipment including:

- 1) Self-Contained Breathing Apparatus certified as compliant with NFPA 1981 and certified by NIOSH as compliant with the CBRN approval criteria,
- 2) Robotic platforms to support various mission areas such as explosive device remediation, hazardous materials operations, tactical law enforcement operations, search & rescue, and surveillance/detection,
- 3) Remote Firing System repairs/upgrades,
- 4) Twin Yamaha 300 HPDI outboard motors,
- 5) Vessel Trailer,
- 6) LRAD Communication / PA system.

APPROPRIATION: Total Amount Appropriated: \$80,074.00 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: US Dept of Homeland Security - 331 / 331510                              | Amount: \$80,074.00               |
|   | To: Repairs and Maintenance - 046-04603<br>Specialized Equipment - 064 / 06429 | Amount: \$4,000.00<br>\$76,074.00 |
| 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.)

This legislation appropriates \$80,074.00 of revenue within the Jacksonville Sheriff's Office Grants subfund for the Homeland Security Grant Program and an equal amount of expenditures in the same subfund for:

- 1) Specialized Equipment - \$76,074,
- 2) Repairs and Maintenance - \$4,000.

**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"/> |    | <p>Justification of Emergency: If yes, explanation must include detailed nature of emergency.</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div>   |
| Federal or State Mandate?      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |    | <p>Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div>   |
| Fiscal Year Carryover?         | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |    | <p>Note: If yes, note must include explanation of all-year subfund carryover language.</p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div>  |
| CIP Amendment?                 | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |    | <p>Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.</p>  |
| Contract / Agreement Approval? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |    | <p>Attachment &amp; 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?</p> <div style="border: 1px solid black; padding: 10px; height: 100px;"> <p>Oversight by: JSO Department of Investigations and Homeland Security - Nancy Wilson. Negotiations are finalized. OGC will review.</p> </div> |
| Related RC/BT?                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |    | <p>Attachment: If yes, attach appropriate RC/BT form(s).</p>  |
| Waiver of Code?                | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |    | <p>Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>   |
| Code Exception?                | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |    | <p>Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>  |
| Related Enacted Ordinances?    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |    | <p>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.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>  |



**ADMINISTRATIVE TRANSMITTAL**

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

Thru: \_\_\_\_\_

(Name, Job Title, Department)

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

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

From: William Clement, Chief - Budget & Management Division, Office of the Sheriff

Initiating Department Representative (Name, Job Title, Department)

Phone: 630-2217

E-mail: [william.clement@jaxsheriff.org](mailto:william.clement@jaxsheriff.org)

Primary Contact : William Clement, Chief - Budget & Management Division, Office of the Sheriff

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CC: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor

904-630-1825 E-mail: [akshelton@coj.net](mailto: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](mailto: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](mailto: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**