LEGISLATIVE FACT SHEET

DATE:	01/11/17	BT or RC No:		
	*	(Administration & City Council Bills)		
SPONS	OR: Public Works R	eal Estate/CM Lori Boyer, CD 5		
		(Department/Division/Agency/Council Member)		
Contact	for all inquiries and prese	ntation: Renee Hunter		
Provide	Name:	Renee Hunter		
	Contact Number:	904-255-8234		
	Email Address:	reneeh@coj.net		
Research w		gislation is necessary? Provide; Who, What, When, Where, How and the Impact.) Council stroduced legislation and the Administration is responsible for all other legislation. of 1 page.)		
property for only unoco are too far	or the location of the San Marco cupied parcel of land in the Sar from the discharge point. Add	with authorization to request the legislation necessary to acquire the subject o pump station. An extensive survey of the area has determined that this is the Marco area that will meet the needs of the project. All other unoccupied parcels litionally, this parcel is centrally located in the area that will be drained. The by 100 feet near the intersection of San Marco Boulevard and Lasalle Street.		
		3,500.00. The negotiated purchase price of the property is \$150,000.00. The ill not sell for less than \$150,000.00.		
If you require additional information, please call Jim Morgan or me at 255-8234.				
		-		
		. =		

APPROPRIATION: Total Amount Appropriated as follows: List the source <u>name</u> and provide Object and Subobject Numbers for each category listed below:					
(Name of Fund as it will appear in t		imbers for each category listed below.			
	From:	Amount:			
lame of Federal Funding Source(s					
	То:	Amount:			
(O) F F O (A)	From:	Amount:			
Name of State Funding Source(s):	To:	Amount:			
	10.	Amount			
Name of City of Jacksonville	From:	Amount:			
Funding Source(s):	То:	Amount:			
Name of In-Kind Contribution(s):	From:	Amount:			
	To:	Amount:			
Name & Number of Bond	From:	Amount:			
Account(s):	То:	Amount:			
		I in the La Salla Street Outfall Project - PW0708			
01					

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

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

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

ACTION ITEMS: Yes Continuation of Grant?	No	Explanation: How will the funds be used? Is the funding for a specific time frame an year of grant? Are there long-term implic	d/or multi-year? If multi-year, note
Surplus Property Certification? Reporting Requirements?	x	Attachment: If yes, attach appropriate for Explanation: List agencies (including City and frequency of reports, including when Department (include contact name and to	/ Council / Auditor) to receive reports reports are due. Provide
Division Chief: Ren	nee Hunter	(signature)	Date: 1/11/2017
Prepared By:Jim	Morgan	Signature	Date: 1/11/2017

ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325				
Thru:	John P. Pappas, Director, Public Works Department				
	(Name, Job Title, Department)				
	Phone: 255-8748 E-mail: pappas@coj.net				
From:	Renee Hunter, Acting Chief, Real Estate Division				
	Initiating Department Representative (Name, Job Title, Department)				
	Phone: 255-8234 E-mail: reneeh@coj.net				
Primary	- Olin Morgan, Band Managomon, Ngam Comor, Near Botato Birtolan				
Contact:	(Hame) des Title, Separation,				
	Phone: 255-8737 E-mail: morgan@coj.net				
CC:	Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor				
	904-630-1825 E-mail: <u>akshelton@coj.net</u>				
COUN	CIL 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:					
T TOTAL	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.					
Indepen	dent 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

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