LEGISLATIVE FACT SHEET

| DATE: | 01/05/16 | BT or RC No: | | | |
|--|--|---|--|--|--|
| | | (Administration & City Council Bills) | | | |
| | | | | | |
| SPONSO | R: Public Works Real Es | tate/CM Garrett Dennis, CD 9 | | | |
| | | (Department/Division/Agency/Council Member) | | | |
| Contact f | or all inquiries and presentation | n Renee K Hunter | | | |
| Provide N | Name: | Renee K Hunter | | | |
| | Contact Number: | 904-255-8234 | | | |
| | Email Address: | reneeh@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.) | | | | | |
| Please provide the Real Estate Division with authority to request the legislation necessary for the City Council to (a) approve the conveyance of one fee parcel by City Quit Claim Deed to FDOT in accordance with Section 122.421, and (b) authorize the Mayor and Corporation Secretary to execute all the necessary documentation to convey said fee parcel to the Florida Department of Transportation. | | | | | |
| The parcel lies at the corner of Kings Road and Kings Park Drive where the City holds a Pedestrian Right-of-Way Easement. The Quit Claim Deed releases the City's interest in that easement. The parcel contains 385 square feet. | | | | | |
| Maps and | drawings are attached for your referer | nce. | | | |
| If you require additional information, please call Jim Morgan at 904-255-8737 or Kiersten Dicks, Right of Way Agent, FDOT District Two at 386-961-7489. | | | | | |
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| Name of Fund as it will appear in ti | tle of legislation) | |
|---|---|--|
| ame of Federal Funding Source(s) | From: | Amount: |
| | То: | Amount: |
| ame of State Funding Source(s): | From: | Amount: |
| | То: | Amount: |
| ame of City of Jacksonville | From: | Amount: |
| unding Source(s): | То: | Amount: |
| ome of the Kind Contribution (a) | From: | Amount: |
| ame of In-Kind Contribution(s): | То: | Amount: |
| | | |
| lame & Number of Bond | From: | Amount: |
| PLAIN LANGUAGE OF APP Explain: Where are the funds coming for a specific time frame 22 & 106 regarding funding of anti- | To: ROPRIATION / FINANCIAL IN ng from, going to, how will the funds or Will there be an ongoing mainten cipated post-construction operation 1 page.) | Amount: MPACT / OTHER: be used? Does the funding require a match? nance? and staffing obligation? Per Chapter |
| Explain: Where are the funds comi he funding for a specific time frame | To: ROPRIATION / FINANCIAL IN ng from, going to, how will the funds or Will there be an ongoing mainten cipated post-construction operation 1 page.) | Amount: MPACT / OTHER: be used? Does the funding require a match? nance? and staffing obligation? Per Chapter |
| PLAIN LANGUAGE OF APP explain: Where are the funds coming for a specific time frame 22 & 106 regarding funding of anti Minimum of 350 words - Maximum of | To: ROPRIATION / FINANCIAL IN ng from, going to, how will the funds or Will there be an ongoing mainten cipated post-construction operation 1 page.) | Amount: MPACT / OTHER: be used? Does the funding require a match? nance? and staffing obligation? Per Chapter |
| PLAIN LANGUAGE OF APP explain: Where are the funds coming for a specific time frame 22 & 106 regarding funding of anti- | To: ROPRIATION / FINANCIAL IN ng from, going to, how will the funds or Will there be an ongoing mainten cipated post-construction operation 1 page.) | Amount: MPACT / OTHER: be used? Does the funding require a match? nance? and staffing obligation? Per Chapter |
| CLAIN LANGUAGE OF APP Explain: Where are the funds coming for a specific time frame 22 & 106 regarding funding of anti- | To: ROPRIATION / FINANCIAL IN ng from, going to, how will the funds or Will there be an ongoing mainten cipated post-construction operation 1 page.) | Amount: MPACT / OTHER: be used? Does the funding require a match? nance? and staffing obligation? Per Chapter |
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| PLAIN LANGUAGE OF APP Explain: Where are the funds comi the funding for a specific time frame 122 & 106 regarding funding of anti Minimum of 350 words - Maximum of | To: ROPRIATION / FINANCIAL IN ng from, going to, how will the funds or Will there be an ongoing mainten cipated post-construction operation 1 page.) | Amount: MPACT / OTHER: be used? Does the funding require a match? nance? and staffing obligation? Per Chapte |

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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. |
|--|--|
| Federal or State Mandate? | Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision. |
| Fiscal Year Carryover? | Note: If yes, note must include explanation of all-year subfund carryover language. |
| CIP Amendment? x Contract / Agreement Approval? x | Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment. 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? PWRE |
| Related RC/BT? x Waiver of Code? x | Attachment: If yes, attach appropriate RC/BT form(s). Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper. |
| Code Exception? x | Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper. |
| Related Enacted Ordinances? | 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 CONTINUED: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

| ACTION ITEMS: Continuation of Grant? | Yes No x | Explanation: How will the funds be used? Does the funding requils the funding for a specific time frame and/or multi-year? If multi-year of grant? Are there long-term implications for the General Fundamental Fundamental | year, note |
|---|--------------|---|------------|
| | | | |
| Surplus Property Certification? Reporting Requirements? | × | Attachment: If yes, attach appropriate form(s). Explanation: List agencies (including City Council / Auditor) to recard frequency of reports, including when reports are due. Provide Department (include contact name and telephone number) response. | € . |
| | | Department (include contact hame and telephone number) respon | ISIDIE IOI |
| Division Chief: | Renee Hunter | (signature) Date: | 1/5/2016 |
| Prepared By: | Jim Morgan | Date: | 1/5/2016 |
| | | | |

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 K. Hunter, Acting Chief, Real Estate Division Initiating Department Representative (Name, Job Title, Department) | | |
| | Phone: 255-8234 E-mail: renceh@coj.net | | |
| Primary Contact: | Jim Morgan, Land Management Agent Senior, Real Estate Division (Name, Job Title, Department) | | |
| | 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: akshelton@coj.net | | |
| COUN | CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL | | |
| То: | 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 | | |
| approvin Independ | on from Independent Agencies requires a resolution from the Independent Agency Board g the legislation. dent Agency Action Item: 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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