LEGISLATIVE FACT SHEET

DATE:	01/26/17	BT or RC No:		
		(Administration & City Council Bills)		
SPONSO	R: Public Works/Real Esta	te/CM Jim Love, CD 14		
	(C	epartment/Division/Agency/Council Member)		
Contact f	or all inquiries and presentations	Renee K. Hunter. Esq. 255-8234 ReneeH@coj.net.		
Provide N	lame:	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.)				
The Real E	state Division is requesting the authoriza	ation to request the legislation necessary for the City Council to declare urplus to the needs of the City, and authorize their sale in accordance		
The Real Estate Division has conducted an investigation of "need", as required by Section 122.422 and it was determined that the City of Jacksonville has no use for the parcel.				
If additional information or assistance is required, please contact myself at 255-8234 or ReneeH@coj.net, or Joe Namey at 255-8792 or namey@coj.net.				
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List the source traine and pr	ovide Object and Subobject N	
Name of Fund as it will appear in	title of legislation)	lumbers for each category listed below:
value of tund as it will appear in		
ame of Federal Funding Source(s) From:	Amount:
	То:	Amount:
	From:	Amount:
Name of State Funding Source(s):		
	То:	Amount:
lame of City of Jacksonville	From:	Amount:
funding Source(s):	То:	Amount:
lame of In-Kind Contribution(s):	From:	Amount:
	То:	Amount:
lame & Number of Bond	From:	Amount:
Account(s):	To:	Amount:
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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
Federal or State Mandate?	х	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.
Fiscal Year Carryover?	х	Note: If yes, note must include explanation of all-year subfund carryover language.
CIP Amendment? Contract / Agreement Approval?	х	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? Oversight PW/RE
Related RC/BT? Waiver of Code?	x 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?	х	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.
Related Enacted Ordinances?	x	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:	Yes No			
Continuation of Grant?	x	Explanation: How will the funds be used? Does t Is the funding for a specific time frame and/or mul year of grant? Are there long-term implications for	lti-year? If mul	ti-year, note
Surplus Property	x	Attachment: If yes, attach appropriate form(s).	-	
Certification?	_ _	Explanation: List agencies (including City Council	il / Auditor\ to s	occive reports
Reporting Requirements?	x	and frequency of reports, including when reports	are due. Provi	ide
		Department (include contact name and telephone	number) resp	onsible for
Division Chief:	Renee K. Hunt	ter Jaco Huntor (signature)	Date:	1/24/2017
Prepared By:	Joe Namey	(signature)	Date:	1/24/2017

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 K, Hunter, Acting Chief, Real Estate Division			
	Initiating Department Representative (Name, Job Title, Department)			
	Phone: 255-8234 E-mail: ReneeH@coj.net.			
Primary	ood Harrioff Edito Fodgiothor and Dioposition Managor			
Contact:	(Name, Job Title, Department)			
	Phone: 255-8792			
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			
10.	Phone: 904-630-4647 E-mail: psidman@coj.net			
From:				
rioni.	Initiating Council Member / Independent Agency / Constitutional Officer			
	Phone: E-mail:			
Primary				
	(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			
l egislati	on from Independent Agencies requires a resolution from the Independent Agency Board			
	ng the legislation.			
	dent Agency Action Item: Yes No			
I	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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