

LEGISLATIVE FACT SHEET

DATE: 03/17/17

BT or RC No: BT17-088
(Administration & City Council Bills)

SPONSOR: Military Affairs and Veteran Services Department
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations Harrison Conyers

Provide Name: Harrison Conyers

Contact Number: 904-630-3621

Email Address: hconyers@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.)

Appropriate a \$200,000 defense infrastructure grant from Enterprise Florida, Inc. The 2014 grant targets willing sellers of land-use easements within certain areas around Outlying Landing Field Whitehouse. COJ has a grant contract signed by all parties and properly executed. Due to the State changing its funding cycle COJ received two EFI encroachment grants in 2014, this one was inadvertently not appropriated at that time This will limit encroachment issues around the airfield and minimize community concerns regarding aircraft noise. The grant expires June 30, 2018.

APPROPRIATION: Total Amount Appropriated: \$200,000.00 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: Enterprise Florida	Amount: \$200,000.00
	To: Contractual Services	Amount: \$200,000.00
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 funding is a defense infrastructure grant from Enterprise Florida, Inc. / ~~Department of Economic Opportunity~~. No matching funds are required and there is no maintenance requirement. *R- 4/3*

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"/>
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Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.

Fiscal Year Carryover?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Note: If yes, note must include explanation of all-year subfund carryover language.

CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.

Contract / Agreement Approval?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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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?

OGC has reviewed the agreement and it has been signed by the OGC and Finance in 2014. This is just the appropriation of said contract. Oversight is provided by the Military Affairs and Veterans Department.

Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Attachment: If yes, attach appropriate RC/BT form(s).

Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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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"/>
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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"/>
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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:

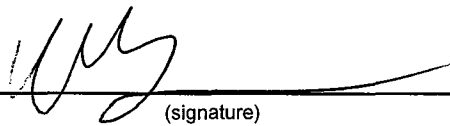
	Yes	No
Continuation of Grant?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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?

Surplus Property Certification?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Reporting Requirements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Dept. Director 
(signature)

Date: 3/17/17

Prepared By: Mala D. Armoza
(signature)

Date: 3/17/17

ADMINISTRATIVE TRANSMITTAL

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

Thru: Bill Spann, Department Director, Military Affairs and Veterans Department
(Name, Job Title, Department)
Phone: 904-630-7087 E-mail: bspenn@coj.net

From: Harrison Conyers, Veterans Services Manager, Military Affairs and Veterans Department
Initiating Department Representative (Name, Job Title, Department)
Phone: 904-630-3621 E-mail: hconyers@coj.net

Primary Contact: Harrison Conyers, Veterans Services Manager, Military Affairs and Veterans Department
(Name, Job Title, Department)
Phone: 904-630-3621 E-mail: hconyers@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