

LEGISLATIVE FACT SHEET

DATE: 03/23/17

BT or RC No: BT17-089
(Administration & City Council Bills)

SPONSOR: Neighborhoods/Environmental Quality Division/Environmental Protection Board
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation: _____

Provide Name: James Richardson, EPB Administrator

Contact Number: 255-7213 (o) 904-300-7093 (m)

Email Address: jrichard@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 purpose of the legislation would be to appropriate funding, in the amount of \$103,895, to the Public Trust Environmental Legal Institute of Florida for the completion of a survey of the tree canopy in Duval County. This project is designed to identify areas of the county where there are gaps in the tree canopy. This information will then be used to analyze the most beneficial locations to direct funds for tree plantings that will benefit the environment. Plan-it-GEO will be the primary partner in this aspect of the project. A comprehensive education and outreach component is included and will ensure the community at large is aware of the information available, receive training on how to utilize the tool and organize community tree plantings. Greenscape of Jacksonville will be the primary partner in the project who will oversee the education and outreach component of the project.

APPROPRIATION: Total Amount Appropriated 103,895 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: _____	Amount: _____
	To: _____	Amount: _____
Name of City of Jacksonville Funding Source(s)	From: EPB Trust Fund Balance	Amount: \$103,895.00
	To: EPB Trust Fund	Amount: \$103,895.00
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.)

The funds will come from the Environmental Protection Trust Fund to be used for the development of a planning tool to assist the city and the community in the most beneficial locations to plant trees. No match is required. The funding would be available for three years from Council approval of the appropriation. Ongoing maintenance costs to be absorbed by the applicant.

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"/>
---------------------------	--------------------------	-------------------------------------

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

Fiscal Year Carryover?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
------------------------	-------------------------------------	--------------------------

Note: If yes, note must include explanation of all-year subfund carryover language.

through FY2020

CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
----------------	--------------------------	-------------------------------------

Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.

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

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?

Neighborhoods Department will provide oversight. The proposed MOU is attached to memorialize the agreement. OGC has form approved the MOU.

Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
----------------	-------------------------------------	--------------------------

Attachment: If yes, attach appropriate RC/BT form(s).

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

Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.

Code Exception?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
-----------------	-------------------------------------	--------------------------

Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.

126.107(g) to specifically prescribe utilization of the Public Trust Environmental Legal Institute of Florida for professional services

Related Enacted Ordinances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
-----------------------------	--------------------------	-------------------------------------

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

The Public Trust is responsible for providing progress reports to the EPB, but there are none required to Council or the Auditor.

Division Chief: Melissa M. Long
(signature)

Date: 3/29/17

Prepared By: James A. Neher
(signature)

Date: 3/29/17

ADMINISTRATIVE TRANSMITTAL

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

Thru: Melissa M. Long, P.E., Environmental Quality Division Chief, Neighborhoods Department
(Name, Job Title, Department)
Phone: 255-7101 E-mail: melissal@coj.net

From: James Richardson, EPB Program Administrator, Neighborhoods Dept.
Initiating Department Representative (Name, Job Title, Department)
Phone: 255-7213 E-mail: jrichard@coj.net

Primary Contact: James Richardson, EPB Program Administrator, Neighborhoods Dept.
(Name, Job Title, Department)
Phone: 255-7213 E-mail: jrichard@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