## **LEGISLATIVE FACT SHEET**

DATE:	04/18/17	BT or RC No:
		(Administration & City Council Bills)
SPONSOR:	Public Works/Real Esta	ate/CM Doyle Carter CD 12
	(	Department/Division/Agency/Council Member)
Contact for all inc	quiries and presentations	Renee Hunter
Provide Name:		Renee Hunter
Contact	Number:	904-255-8234
Email A	ddress:	reneeh@coj.net
Research will complete (Minimum of 350 v	this form for Council introduced I words - Maximum of 1 pag	
Please provide the Reproperty for \$156,000		rization to request the legislation necessary to acquire the subject
residential home is not the roadway is now a curve in the roadway guard rail on the curvesidential enjoyment City's best interest to After purchase of the later disposed of.	ow in close proximity to the ecoporoximately three feet higher there is the potential for an every will not alleviate the concert of the property. As the cost purchase the home so that the property, the structures will be	mpacted an adjacent residential home. With the widening complete, the dige of pavement. The home is within 15 feet of the travel surface and ir than the adjacent yard. As the home is located on the outside of a trant vehicle to leave the roadway and strike the home. Installation of a in. In addition, the noise and vibration from traffic are interfering with the for mitigation measures would exceed the value of the home, it is in the ne residents may relocate.  The demolished and the property will be added to the City's inventory, and in Morgan at 255-8737 or me at 255-8234.

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Name of Fund as it will appear in title of legis  Name of Federal Funding Source(s)  To:  Name of State Funding Source(s):  To:  Name of City of Jacksonville  From:  To:  To:	ect and Subobject Numbers for each category listed below:  ation    Amount:   Amount:   Amount:   Amount:
ame of Federal Funding Source(s)  To:  Iame of State Funding Source(s):  From:  To:  From:  To:  From:  To:  Iame of City of Jacksonville unding Source(s):	Amount:  Amount:  Amount:  Amount:
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lame of State Funding Source(s):  To:  lame of City of Jacksonville  from:	Amount:
lame of State Funding Source(s):  To:  lame of City of Jacksonville unding Source(s):	Amount:
Name of City of Jacksonville From:	
unding Source(s):	Amount:
	Amount:
F	Amount
lame of In-Kind Contribution(s):	Amount:
То:	Amount:
lame & Number of Bond From:	Amount:
ccount(s):	Amount:
Minimum of 350 words - Maximum of 1 page.) Funds for the acquisition are paid by PWCP3	51SD541-06504 PW0382-01.

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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?	×	Justification of Emergency: If yes, explanation must include detailed nature of
Federal or State Mandate?	x	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?	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?  Oversight PW/RE
Related RC/BT? 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?	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:  Continuation of Grant?	Yes No x	Explanation: How will the funds be used? Does the funding require a match? s 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?	х	Attachment: If yes, attach appropriate form(s).  Explanation: List agencies (including City Council / Auditor) to receive reports
Reporting Requirements?	х	and frequency of reports, including when reports are due. Provide Department (include contact name and telephone number) responsible for
		+ 1/1
Division Chief:	Renee Hunter	(signature) Date: 4/19/2017
Prepared By:	Jim Morgan	Date: 4/19/2017
	4/	

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## **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: renech@coj.net		
Primary	Jim Morgan, Land Management Agent Senior, Real Estate Division		
Contact:	(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		
To:	Peggy Sidman, Office of General Counsel, St. James Suite 480		
	Phone: 904-630-4647 E-mail: psidman@coj.net		
From:			
i ioiii.	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		
Logiclatic	on from Independent Agencies requires a resolution from the Independent Agency Board		
	of from independent Agencies requires a resolution from the independent Agency board		
approvin	g the legislation.		
	g the legislation. dent Agency Action Item: Yes No		
Independ	g the legislation.  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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