

# LEGISLATIVE FACT SHEET

DATE: 05/02/17

BT or RC No: BT17-103  
(Administration & City Council Bills)

SPONSOR: Finance & Administration  
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation: Teresa Eichner

Provide Name: Teresa Eichner

Contact Number: 904-630-7051

Email Address: [teichner@coj.net](mailto:teichner@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.)

This request is to transfer funding from 9A Baymeadows Park project to Betz - Tiger Point - Phase 1 Masterplan and appropriate funding from completed capital projects that have been certified complete by the Director of Public Works and returned to their source of origin, as well as \$100,000 from the North Care Clinic project that has notified COJ that it will not be completed and the organization will not be pursuing to 9A Baymeadows Park. This transfer is needed to clean-up an appropriation in the FY16 CIP that inadvertently used settlement agreement funding from Cedar Bay Co Generating Station for the 9A Baymeadows Park project. This will replenish the settlement agreement and fund the 9A Baymeadows Park project as adopted.

APPROPRIATION: Total Amount Appropriated \$2,062,000.00 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: _____	Amount: _____
	To: _____	Amount: _____
Name of City of Jacksonville Funding Source(s):	From: various sources - see attached BT	Amount: \$2,062,000.00
	To: various sources - see attached BT	Amount: \$2,062,000.00
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.)

This request is to transfer funding from 9A Baymeadows Park project to Betz - Tiger Point - Phase 1 Masterplan and appropriate funding from completed capital projects that have been certified complete by the Director of Public Works and returned to their source of origin, as well as \$100,000 from the North Care Clinic project that has notified COJ that it will not be completed and the organization will not be pursuing to 9A Baymeadows Park. This transfer is needed to clean-up an appropriation in the FY16 CIP that inadvertently used settlement agreement funding from Cedar Bay Co Generating Station for the 9A Baymeadows Park project. This will replenish the settlement agreement and fund the 9A Baymeadows Park project as adopted.

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

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

"The Council finds that the deferral of this amendment of the CIP until the next annual budget and CIP review will be detrimental to the best interests of the community because such deferral impacts a legal settlement agreement and the use of funding provided by it as well as stall two recreational projects, which are beneficial to the community."

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?

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

Division Chief: \_\_\_\_\_  
(signature)

Date: 5/9/17

Prepared By: Jerisa R. Eichner  
(signature)

Date: 5/11/17

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: Angela Moyer, Budget Officer, Finance & Administration  
(Name, Job Title, Department)  
Phone: 904-630-1259 E-mail: [amoyer@coj.net](mailto:amoyer@coj.net)

From: Teresa Eichner, CIP Administrator, Finance & Administration  
Initiating Department Representative (Name, Job Title, Department)  
Phone: 904-630-7051 E-mail: [teichner@coj.net](mailto:teichner@coj.net)

Primary Contact: Teresa Eichner, CIP Administrator, Finance & Administration  
(Name, Job Title, Department)  
Phone: 904-630-7051 E-mail: [teichner@coj.net](mailto:teichner@coj.net)

CC: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor  
904-630-1825 E-mail: [akshelton@coj.net](mailto: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](mailto: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](mailto: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**