LEGISLATIVE FACT SHEET

| DATE: | 09/15/17 | BT or RC No: | | | |
|--|----------------------------------|---|--|--|--|
| | | (Administration & City Council Bills) | | | |
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| SPONSOF | 1: Public Works/Real Esta | ate/CM Reggie Gaffney CD 7 | | | |
| | (| Department/Division/Agency/Council Member) | | | |
| Contact fo | r all inquiries and presentation | Renee Hunter. Esq. 255-8234 ReneeH@coj.net. | | | |
| Provide Na | me: | Renee Hunter | | | |
| C | ontact Number: | 904-255-8234 | | | |
| E | mail 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.) | | | | | |
| Proposed Surplus: RE# 045573-0000 Conveyance to the Florida Department of Transportation: The Real Estate Division is requesting the authorization to request the legislation necessary for the City Council to declare the subject tax reverted parcel "surplus" to the needs of the City, and authorize its conveyance to The Florida Department of Transportation (FDOT) at no cost, in accordance with Chapter 122, Part 4, Subpart B, Section 122.421 (b) of the City Ordinance Code. | | | | | |
| The subject parcel is a tax reverted vacant 96'x59' lot. The subject parcel is assessed at \$3,643.00 and reverted to the City on 5/8/2017. | | | | | |
| The FDOT needs the property identified as it is directly adjacent to their existing 1-95 right of way and will be used for an upcoming interstate widening project | | | | | |
| The Real Estate Division has conducted an investigation of "need", as required by Section 122.422. As a result of said investigation, the Real Estate Division has determined that no "need" exists for the subject parcel by either the City or any Independent Agency other than FDOT. | | | | | |
| If additional information or assistance is required, please contact Joe Namey at 255-8792 or at namey@coj.net | | | | | |
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| APPROPRIATION: Total A | A CONTRACTOR OF THE STATE OF TH | as follows: |
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| List the source <u>name</u> and pr | ovide Object and Subobject Number | ers for each category listed below: |
| Name of Fund as it will appear in | title of legislation) | |
| | From: | Amount: |
| lame of Federal Funding Source(s | | |
| · · · · · · · · · · · · · · · · · · · | То: | Amount: |
| | From: | Amount: |
| Name of State Funding Source(s): | | Allount |
| | То: | Amount: |
| Name of City of Jacksonville | From: | Amount: |
| Name of City of Jacksonville Funding Source(s): | Tion. | Amount. |
| **** | То: | Amount: |
| 1776 | F | |
| Name of In-Kind Contribution(s): | From: | Amount: |
| | То: | Amount: |
| | | |
| Name & Number of Bond Account(s): | From: | Amount: |
| | то: | Amount: |
| Minimum of 350 words - Maximum of The City will be saving an estimate | or 1 page.) ed amount of \$4,700 per year in maintenan | ce costs. |
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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 |
| , | | emergency. |
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| Federal or State | | Explanation: If yes, explanation must include detailed nature of mandate |
| Mandate? | x | including Statute or Provision. |
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| Fiscal Year | | Note: If yes, note must include explanation of all-year subfund carryover |
| Carryover? | × | language. |
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| | | Attachments If you often appropriate CID form(a) leaded a institution for |
| CIP Amendment? | x | Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment. |
| Contract / Agreement | \vdash | Attachment & Explanation: If yes, attach the Contract / Agreement and name |
| Contract / Agreement | x | of Department (and contact name) that will provide oversight. Indicate if |
| Approval? | | negotiations are on-going and with whom. Has OGC reviewed / drafted? |
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| Related RC/BT? | x | Attachment: If yes, attach appropriate RC/BT form(s). |
| Walter of Code? | | Code Reference: If yes, identify code section(s) in box below and provide |
| Waiver of Code? | × | detailed explanation (including impacts) within white paper. |
| | | |
| | | |
| Code Finantian | | Code Reference: If yes, identify code in box below and provide detailed |
| Code Exception? | × | explanation (including impacts) within white paper. |
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| | | |
| Dalak de la | | Code Reference: If yes, identify related code section(s) and ordinance |
| Related Enacted X | 1 | reference number in the box below and provide detailed explanation and any |
| Ordinances? ^ | | changes necessary within white paper. |
| | | Pursuant to Chapter 122, Part 4, Subpart B, Section 122.421 (b) of the City |
| | | Ordinance Code. |
| | | |

ACTION ITEMS CONTINUED: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

| COntinuation of Grant? | Explanation: How will the funds be used? It is the funding for a specific time frame and/year of grant? Are there long-term implications. | or multi-year? If multi-year, note |
|--|---|--|
| #1 | | |
| Surplus Property Certification? Reporting Requirements? | Attachment: If yes, attach appropriate form Explanation: List agencies (including City C and frequency of reports, including when re Department (include contact name and tele | ouncil / Auditor) to receive reports ports are due. Provide |
| | | |
| Division Chief: Renee Hun | ter Road Hante (signature) | Date: 9/15/2017 |
| Prepared By:Joe Namey | (signature) | Date: 9/15/2017 |

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: <u>pappas@coj.net</u> | | |
| From: | Renee Hunter, Chief, Real Estate Division | | |
| | Initiating Department Representative (Name, Job Title, Department) | | |
| | Phone: 255-8234 E-mail: ReneeH@coj.net. | | |
| Primary | Joe Namey, Land Acquisition and Disposition Manager | | |
| Contact: | (Name, Job Title, Department) | | |
| | Phone: 255-8792 E-mail: <u>namey@coj.net</u> | | |
| CC: | Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor | | |
| | 904-630-1825 E-mail: akshelton@coj.net | | |
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| COUN | CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL | | |
| То: | 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_ | | |
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| Legislati | on from Independent Agencies requires a resolution from the Independent Agency Board | | |
| - | g the legislation. | | |
| Indepen | dent Agency Action Item: Yes No | | |
| | Boards Action / Resolution? Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled? | | |
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FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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