

## LEGISLATIVE FACT SHEET

DATE: 01/29/18

BT or RC No: BT18-049  
(Administration & City Council Bills)

SPONSOR: Neighborhoods / Municipal Code Compliance Division  
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation: \_\_\_\_\_

Provide Name: Bryan Mosier, Chief, Municipal Code Compliance Division

Contact Number: 255-7005

Email Address: [Bmosier@coj.net](mailto:Bmosier@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 legislation is needed to provide funding assistance for nuisance abatement contracting to remove property code violations city-wide in Duval County in accordance with Chapter 518, Property Safety and Maintenance Code. Section 111.470 states that disbursements from this fund by Council shall be limited to funding the abatement of nuisances. Monies deposited into this fund shall not lapse at the end of any fiscal year and shall remain available for expenditure for the purposes set forth herein. This appropriation of \$1,923,000 from the Nuisance Abatement Lien Special Revenue Fund, for nuisance abatement and compliance serves as a major funding source that supplements general fund revenue for nuisance abatement contractual services. The Neighborhoods-Municipal Code Compliance Division will utilize 49% (\$942,270) and Public Works will utilize 51% (\$980,730), split between Mowing & Landscape - Private Property (\$637,475) and Mowing & Landscape-Tree Removal (\$343,255).

APPROPRIATION: Total Amount Appropriated \$1,923,000.00 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: Nuisance Abatement Lien Fund / HNPS1L2NA	Amount: \$1,923,000.00
	To: Nuisance Abatement Lien Fund/HNPS1L2NA Municipal Code Compliance (ERCC1L2CP), Mowing/Landscape - Private Property (PWML1L2SPP) and Mowing/Landscape Private Property-Tree Removal (PWML1L2PPTR)	Amount: \$1,923,000.00
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.)

These funds are coming from the Nuisance Abatement Lien Fund, there is no match required, dollars deposited into this fund shall not lapse at the end of any fiscal year and shall remain available for expenditure for the purpose of nuisance abatement city-wide.

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

**ACTION ITEMS:**

Emergency?  Yes  No

Justification of Emergency: If yes, explanation must include detailed nature of emergency.

Federal or State Mandate?  Yes  No

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

Fiscal Year Carryover?

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

This is an all years sub-fund, carry over is not required.

CIP Amendment?

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

Contract / Agreement Approval?

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?

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

Waiver of Code?

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

Code Exception?

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

Related Enacted Ordinances?

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.

Ordinances 2007-286-E, 2016-0061-E, 2016-0407-E and 2017-145-E

**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?

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?

Reporting Requirements?

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

Division Chief: Bryan Mosier

(signature)

Date: 1/31/18

*Chuck McNeil*

Prepared By: Chuck McNeil, Finance Manager

(signature)

Date: 1-31-18

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: Stephanie Burch, Esq., Director, Neighborhoods

(Name, Job Title, Department)

Phone: 255-8902

E-mail: [stephanieb@coj.net](mailto:stephanieb@coj.net)

From: Bryan Mosier, Division Chief, Neighborhoods

Initiating Department Representative (Name, Job Title, Department)

Phone: 255-7005

E-mail: [bmosier@coj.net](mailto:bmosier@coj.net)

Primary Contact: Same as above

(Name, Job Title, Department)

Phone: same as above

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)

**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)

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**