LEGISLATIVE FACT SHEET

DATE:	01/04/18	BT or RC No:
		(Administration & City Council Bills)
SPONSOR: Public		blic Works/Engineering & Construction Management
		(Department/Division/Agency/Council Member)
Contact	for all inquiries and presen	tationTom_Fallin
Provide I	Name:	Tom Fallin
	Contact Number:	255-8710
	Email Address:	ThomasF@coj.net
Research w	White Paper (Explain Why this legis ill complete this form for Council intr n of 350 words - Maximum o	slation is necessary? Provide; Who, What, When, Where, How and the Impact.) Council roduced legislation and the Administration is responsible for all other legislation.
Boulevard (currently sextension further nor property coprocess of completion	, including the addition of a left to single left turn,) the addition of a of the existing right turn lane from the in order to allow for a safer co surrently owned or maintained by being acquired by FDOT and we to of construction of the improven	evard for approximately 0.6 miles between Bartram Drive East to Cesery urn lane from westbound Atlantic to southbound SR 109/University Blvd. to eastbound Atlantic, a right turn lane from northbound SR 109/University Blvd. to eastbound Atlantic, m southbound SR 109 to westbound Atlantic and realignment of Lawrence Place brancetion to SR 109 than currently exists. Portions of the improvements are on the City, while other portions of the property are currently owned or in the ill be transferred to the City upon completion of the improvements. Upon ments, the Department will transfer the Transferred Property to the City via a nue to own, operate, maintain and repair the property and all improvements.

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APPROPRIATION: Total Al	nount Appropriatec	\$0.00	as follows:
List the source_name and pro	ovide Object and Subob	ject Numbers for each	category listed below:
(Name of Fund as it will appear in t	tle of legislation)		
Name of Federal Funding Source(s)	From:		Amount:
Tame of Federal Federal Goods	То:		Amount:
Name of State Funding Source(s):	From:		Amount:
Ivalie of State Fullding Source(s).	То:		Amount:
Name of City of Jacksonville	From:		Amount:
Funding Source(s):	То:		Amount:
Name of la Kind Contribution(a)	From:		Amount:
Name of In-Kind Contribution(s):	То:		Amount:
Name & Number of Bond	From:		Amount:
Account(s):	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.)

(Millimani of 330 words - Maximani of 1 page.)	
FDOT, at their own cost, will make the inters	section improvements at SR 109/University at Atlantic Blvd. Upon completion,
the City shall own, operate, maintain and rep	pair the improvements at its sole cost and expense.
ACTION ITEMS: Purpose / Check	List. If "Yes" please provide detail by attaching justification, and
code provisions for each.	
code provisions for each.	
ACTION ITEMS: Yes No	
ACTION TEST NO	Land Control C
Emergency? X	Justification of Emergency: If yes, explanation must include detailed nature of
Zinorgonoy.	emergency.
Federal or State	Explanation: If yes, explanation must include detailed nature of mandate
Mandate? X	including Statute or Provision.
Mariano.	

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Fiscal Year Carryover?	Note: If yes, note must include explanation of all-year subfund carryover language.
CIP Amendment? X 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? Public Works will provide project oversight. OGC and Risk Management have reviewed the request.
Related RC/BT? X	Attachment the production PO/PT (/-)
Related RC/BT? X 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 Reference: If yes, identify code in box below and provide detailed
Code Exception? X	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.
ACTION ITEMS CONTINUED: Pur justification, and code provisions fo	rpose / Check List. If "Yes" please provide detail by attaching reach.
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 X	Attachment: If yes, attach appropriate form(s).

Reporting X 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:	Marin Date: 1.8.18 (signature)
Prepared By: Sai Wes	Date: 1-5-18
	(signature)

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ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325		
Thru:	John P. Pappas, P.E., Director of Public Works		
	(Name, Job Title, Department)		
	Phone: 255-8707 E-mail: pappas@coj.net		
From:	Tom Fallin, P.E., Chief, Engineering & Construction Management Division		
	Initiating Department Representative (Name, Job Title, Department)		
	Phone: 255-8763 E-mail: ThomasF@coj.net		
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		
COUN	CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL		
То:	Pager Sidman Office of Canaral Council St. James Suite 490		
10.	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647 E-mail: psidman@coj.net		
From:			
rioni.	Initiating Council Member / Independent Agency / Constitutional Officer		
	Phone: E-mail:		
5:	z man.		
Primary			
Comaci.	(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_		
Logislati	on from Independent Agencies requires a resolution from the Independent Agency Board		
	ng 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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