

## LEGISLATIVE FACT SHEET

DATE: 04/09/18

BT or RC No: BT18-069  
(Administration & City Council Bills)

SPONSOR: JFRD/Emergency Preparedness Division  
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations: JFRD

Provide Name: Jesse Modican

Contact Number: 904-255-3119

Email Address: jmodican@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.)

The City of Jacksonvilles Emergency Preparedness Division acceptance of the State fo Florida grant to cover cost of an Anti-Vehicle Barrier system. This system features allow for rapid deployment on roadways and other hard surfaces, single person portability, non hydraulic design which reduces trainging and maintenance cost, and modular design to enable flexible configuration. This project is designed to address the new and emerging threat posed by terrorist using vehicles to conduct attacks using Vehicle Borne Improvised Explosive Devices (VBIED). This project will have a positive impact on the city by enhancing the current security measures used to protect the public during gatherings and will also serve as a model for other communities and surrounding districts. There will be an increase of one to the EPD vehicle cap due to this system being carried on a trailer. There is No city match.

APPROPRIATION: Total Amount Appropriated \$79,000.00 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) Department of Homeland Security / FEMA

Name of Federal Funding Source(s)	From: _____	Amount: _____
	To: _____	Amount: _____
Name of State Funding Source(s):	From: Florida Division of Emergency Management	Amount: \$79,000.00
	To: City of Jacksonville Emergency Preparedness Division	Amount: 79,000. <sup>00</sup>
Name of City of Jacksonville Funding Source(s):	From: _____	Amount: _____
	To: _____	Amount: _____
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.)

The funding is coming from the Florida Division of Emergency Management and there is no match required. The funding needs to be spent by August 31, 2018. There will be minor ongoing maintenance cost and no staffing obligations

**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.

The Emergency Preparedness Division presented an Anti-Vehicle Barrier Project to the Florida Domestic Security Coordinating Group for FY 2018-2019 State Homeland Security Grant Program (SHGP) funds.

Because of the urgency of this initiative, the State of Florida, through the Domestic Security Coordinating Group, re-appropriated \$79,000 from State Homeland Security Grant Program FY 2015-2016 funds to allow the City of Jacksonville to immediate purchase Anti-Vehicle Barriers.

FY 2015-2016 State Homeland Security Grant Program funds must be expended and the Anti-Vehicle Barriers procured and received no later than August 31, 2018.

The Anti-Vehicle Barrier manufacturer requires at least 60 days for production.

We are requesting the emergency legislation in order to meet the strict grant funding timeline.

Federal or State Mandate?           

**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.

CIP Amendment?              
 Contract / Agreement Approval?           

**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?

Related RC/BT?              
 Waiver of Code?           

**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?

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.

**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
<input type="checkbox"/>	<input checked="" 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? 

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

  
Reporting Requirements? 


Yes	No
<input checked="" 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  
LT Jesse Modican will be responsible for reporting to the Florida Division of Emergency Management.

Division Chief:   
(signature)

Date: 4-27-18

Prepared By:   
(signature)

Date: 4/27/18

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: Jesse Modican, LT, JFRD/Emergency Preparedness Division  
(Name, Job Title, Department)  
Phone: 904-255-3119 E-mail: jmodican@coj.net

From: Steven Woodard, Division Chief of Emergency Preparedness, JFRD  
Initiating Department Representative (Name, Job Title, Department)  
Phone: 904-255-3123 E-mail: swoodard@coj.net

Primary Contact: LT Jesse Modican, Emergency Preparedness Division, JFRD  
(Name, Job Title, Department)  
Phone: 904-255-3119 E-mail: jmodican@coj.net

CC: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor  
904-630-1825 E-mail: 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

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

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**