LEGISLATIVE FACT SHEET

DATE:	04/26/	18		BT or RC No:		
		·	(Admir	nistration & City Co	ouncil Bills)	
SPONS	OR:	Public Works	/ Engineering an	nd Construction	Management	
-			partment/Division/Ag			
.						
	for all inquiries and	presentation:				
Provide	-		Tom F	allin		
	Contact Number:		255 - 8710		, I	
	Email Address:	<u>t</u>	homasf@coj.net			
Research v (Minimu:	: White Paper (Explain Wh vill complete this form for C m of 350 words - Ma: epartment of Transporta	Council introduced lease (simum of 1 page.)	slation and the Adminis	tration is responsible	for all other legislation	on.
drainage s property a be constru improvem	, signs and pavement new systems. Certain portion are currently owned or in a cuted on City property ownes, the Department woo own, operate, maintain	ons of the property a n the process of bein r on or within the tra ill transfer the Trans	re currently owned a og acquired by FDOT nsferred property. U ferred Property to the	nd maintained by ((Transferred Prop pon completion of e City via a map tra	COJ, while other perty). The improventury of the	ortions of the vements will e
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APPROPRIATION: Total Ar	nount Appropriated	\$0.00	as follows:
List the source <u>name</u> and pro	ovide Object and Subobject Numbers	for each c	ategory listed below:
(Name of Fund as it will appear in t	tle of legislation)		
Name of Federal Funding Source(s	From:		Amount:
()	То:		Amount:
Name of State Funding Source(s):	From:		Amount:
	To:		Amount:
Name of City of Jacksonville	From:		Amount:
Funding Source(s):	То:		Amount:
Name of In-Kind Contribution(s):	From:		Amount:
(-)	То:		Amount:
Name & Number of Bond	From:		Amount:
Account(s):	То:		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.)

(Normandy Blvd.) (SR 228). Upon completi	a project known as County Road 115 (Chaffee Rd (CR 115) at State Road 228 on of construction, the city will operate, maintain and repair the improvements,
Iwhich will not introduce any new effort regai	rding maintenance and repairs, barring unforeseen conditions.
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ACTION ITEMS: Purpose / Check I code provisions for each.	ist. If "Yes" please provide detail by attaching justification, and
ACTION ITEMS: Yes No	
ACTION ITEMS: Yes No Emergency? X	Justification of Emergency: If yes, explanation must include detailed nature of emergency.
Federal or State	Explanation: If you explanation must include detailed nature of mandate
Mandate?	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.
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Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment. Attachment & Explanation: If yes, attach the Contract / Agreement and nam of Department (and contact name) that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed / drafted? Public Works, Engineering and Construction Management Division will proviped to versight. OGC and Risk Management have reviewed the request. 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? X Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper. Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper. 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	
Related RC/BT? 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 Exception? X Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper. 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.	
Waiver of Code? X Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper. Code Exception? X Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper. 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	
Code Exception? X Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper. Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper. 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	
Related Enacted Ordinances? X 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	
Ordinances? X 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	
	 y
jacamouton, and oddo provisions for each.	
ACTION ITEMS: Yes No Continuation of Grant? X Explanation: How will the funds be used? Does the funding require a match ls 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? X Attachment: If yes, attach appropriate form(s).	

Reporting Requirements	~	Explanation: List agencies and frequency of reports, in (include contact name and t	cluding when reports a	re due. Provide Department
Division Chief:		(signature)		Date: 4/27/2018
Prepared By:	Lari C	(signature)		Date: 5-1-18

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:	Thomas Fallin, P.E., Chief of Engineering and Construction Management Div.
	Initiating Department Representative (Name, Job Title, Department)
	Phone: 255 - 8710 E-mail: thomasf@coj.net
Primary	Thomas Fallin, P.E., Chief of Engineering and Construction Management Div.
Contact:	(Name, Job Title, Department)
	Phone: 255 - 8710 E-mail: <u>thomasf@coj.net</u>
CC:	Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor
	904-630-1825 E-mail: <u>akshelton@coj.net</u>
COUN	CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
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To:	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647 E-mail: psidman@coj.net
	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
•	
_	on from Independent Agencies requires a resolution from the Independent Agency Board
	g the legislation. dent Agency Action Item: Yes No
•	ICH AUCHA ALIUH HERB. 188 NO
	Attachment: If we extract appropriate decumentation. If no
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FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED