

**LEGISLATIVE FACT SHEET**

DATE: 05/02/18

BT or RC No: BT18-078  
(Administration & City Council Bills)

SPONSOR: Neighborhoods Department / Housing and Community Development Division  
(Department/Division/Agency/Council Member)

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

Provide Name: Diana M Seydlorsky

Contact Number: 255-8204

Email Address: [dianams@coj.net](mailto:dianams@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 appropriates additional 2017-2020 funding received from Florida Housing Finance Corporation (FHFC) for the State Housing Initiatives Partnership (SHIP) program administered by the Housing and Community Development Division. Florida Housing Finance Corporation has provided these supplemental funds to local governments to mitigate the negative impact of Hurricane Irma on the citizens of Duval County.

APPROPRIATION: Total Amount Appropriated: \$204,000.00 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: Florida Department of Economic Opportunity (334591)	Amount: \$204,000.00
	To: Other Grants and Aids (08301)	Amount: \$204,000.00
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.)

Florida Housing Finance Corporation (FHFC), under appropriations it receives from the Florida Department of Economic Opportunity for the State Housing Initiatives Partnership (SHIP) program, provides formula grants to local governments as an incentive to create partnerships that produce and preserve affordable homeownership and multifamily housing. SHIP dollars may be used to fund emergency repairs, new construction, rehabilitation, down payment and closing cost assistance, impact fees, construction and gap financing, mortgage buy-downs, acquisition of property for affordable housing, matching dollars for federal housing grants and programs, and homeownership counseling.

The funds being appropriated within this legislation will be spent to mitigate the impact of Hurricane Irma on the citizens of Duval County. Pursuant to the City's Local Housing Assistance Plan (LHAP), these funds are eligible to be used on items such as, but not limited to: 1) purchase of emergency weather proofing supplies for damaged homes; 2) interim repairs to avoid further damage and/or tree and debris removal required to make the unit habitable; 3) construction of wells or repair of existing wells where public water is not available; 4) payment of insurance deductibles for rehabilitation of homes covered under homeowner's insurance policies; 5) security deposits or rental assistance for eligible recipients that have been displaced from their homes due to damage from the storm; and other activities as proposed by the county and approved by Florida Housing.

There is no match requirement for these funds, however, the City uses SHIP program funds to meet the match requirements of the federal HOME Investment Partnerships program received from the U.S. Department of Housing and Urban Development (HUD).

These funds must be fully expended for completed projects no later than June 30, 2020.

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

**ACTION ITEMS:**

	Yes	No
Emergency?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Federal or State Mandate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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**Explanation:** If yes, explanation must include detailed nature of mandate including Statute or Provision.

Fiscal Year Carryover?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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**Note:** If yes, note must include explanation of all-year subfund carryover language.

This is an all-years subfund.

CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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**Attachment:** If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.

Contract / Agreement Approval?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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**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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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**Attachment:** If yes, attach appropriate RC/BT form(s).

Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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**Code Reference:** If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.

Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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**Code Reference:** If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.

Related Enacted Ordinances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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**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:**

	Yes	No
Continuation of Grant?	X	

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?

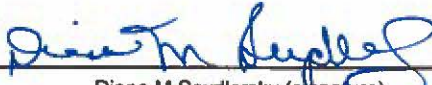
The funds being appropriated within this legislation will be spent to mitigate the impact of Hurricane Irma on the citizens of Duval County. Pursuant to the City's Local Housing Assistance Plan (LHAP), these funds are eligible to be used on items such as, but not limited to: 1) purchase of emergency weather proffing supplies for damaged homes; 2) interim repairs to avoid further damage and/or tree and debris removal required to make the unit habitable; 3) construction of wells or repair of existing wells where public water is not available; 4) payment of insurance deductibles for rehabilitation of homes covered under homeowner's insurance policies; 5) security deposits or rental assistance for eligible recipients that have been displaced from their homes due to damage from the storm; and other activities as proposed by the county and approved by Florida Housing.

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Surplus Property Certification?		X
Reporting Requirements?		X

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 reports.

Division Chief:   
 Diana M Seydlorsky (signature)

Date: 5/7/18

Prepared By:   
 Laura Stagner (signature)

Date: 5/7/2018

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: Stephanie Burch, Director, Neighborhoods Department

(Name, Job Title, Department)

Phone: 255-8902

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

From: Diana M. Seydlorsky, Chief, Housing and Community Development Division

Initiating Department Representative (Name, Job Title, Department)

Phone: 255-8204

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

Primary Contact: Diana M. Seydlorsky, Chief, Housing and Community Development Division

(Name, Job Title, Department)

Phone: 255-8204

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

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:

Boards Action / Resolution?

Yes

No

Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?

**FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED**