

## LEGISLATIVE FACT SHEET

DATE: 11/13/18

BT or RC No: BT19-034  
(Administration & City Council Bills)

SPONSOR: FIRE AND RESCUE  
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations: Keith Powers

Provide Name: Keith Powers

Contact Number: 630-7868

Email Address: [kpowers@coj.net](mailto:kpowers@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.)

Transfer funds to purchase clothing and bunker gear for the new rescue personnel to be assigned to R17, R37, R44 and R61 . Also, purchase capital equipment including cardiac monitors, stairchairs, stretchers, SCBA's and autopulse for eight (8) new rescue units as approved in the FY 2019 budget. The Rescue vehicles approved on the 2019 B4c schedule of the budget included R17, R29, R37, R44, R61, R04, R10, R14.

Funding must be moved to a capital line item for accounting purposes. The total transfer exceeds the mayor's transfer authority and requires Council approval.



APPROPRIATION: Total Amount Appropriated \$790,000.00 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: Operating Supplies -Rescue and Fire Operations	Amount: \$790,000.00
	To: Capital Outlay, Bunker Gear, Clothing sub-objects	Amount: \$790,000.00
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.)

The funding is being moved from Operating Supplies in the FY 19 general fund budget to capital outlay, clothing, and bunker gear sub-objects so the equipment and safety gear may be procured for the new rescue units and personnel. This does not require a match. The funding is necessary in order to place new R17, R37, R44 and R61 into service in January and April 2019 and procure equipment for previous rescue units placed in service using all spare capital items available in JFRD. On-going maintenance is required and funded as part of the JFRD annual budget and there is no staffing obligation with this transfer of funds.

**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. <div style="border: 1px solid black; height: 60px; margin-top: 5px;"></div>
Federal or State Mandate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision. <div style="border: 1px solid black; height: 60px; margin-top: 5px;"></div>
Fiscal Year Carryover?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Note: If yes, note must include explanation of all-year subfund carryover language. <div style="border: 1px solid black; height: 60px; margin-top: 5px;"></div>
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment. <div style="border: 1px solid black; height: 60px; margin-top: 5px;"></div>

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.

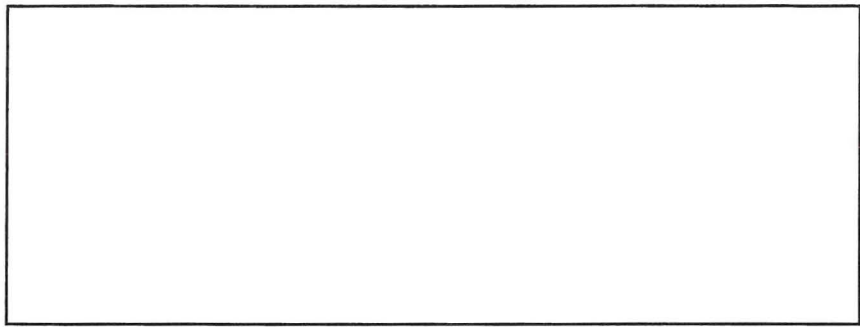
**ACTION ITEMS CONTINUED:** Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

**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: *[Signature]*  
(signature)

Date: 11/14/18

Prepared By: *[Signature]*  
(signature)

Date: 11-14-18

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: Kurtis Wilson, Director/Fire Chief  
(Name, Job Title, Department)  
Phone: 904-630-7868 E-mail: [krwilson@coj.net](mailto:krwilson@coj.net)

From: Keith Powers, Chief of Operations  
Initiating Department Representative (Name, Job Title, Department)  
Phone: 904-630-7871 E-mail: [kpowers@coj.net](mailto:kpowers@coj.net)

Primary Contact: Keith Powers  
(Name, Job Title, Department)  
Phone: 904-630-7871 E-mail: [kpowers@coj.net](mailto:kpowers@coj.net)

CC: Jordan Elsbury, Intergovernmental Affairs Liaison  
904-630-1825 E-mail: [jelsbury@coj.net](mailto:jelsbury@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: Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor

904-630-1825 E-mail: jelsbury@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**