LEGISLATIVE FACT SHEET

DATE:	0.	2/13/19	BT or RC No:
		<u> </u>	(Administration & City Council Bills)
SPONS	SOR:	Public '	Works / Engineering and Construction Management
			(Department/Division/Agency/Council Member)
Contac	t for all inquirie	s and presentat	ions
Provide	Name:		William J. Joyce, P.E.
	Contact Num	nber:	255 - 8763
	Email Addres	ss:	joyce@coj.net
Research (Minimu	will complete this for um of 350 words	rm for Council introdu s - Maximum of 1	
minimum Milepost features	10 foot wide and 0.941 to Milepost and landscaping f	approximately 241 1.398, including wi eatures, as well as	will, at no cost to the city, undertake a project for the construction of a 3 foot long asphalt/concrete multi-use trail within the SR 105 right of way from thout limitation, signs and pavement markings, curb ramp(s), all drainage a pedestrian bridge over Haulover Creek. Upon completion of construction of a repair the property and all improvements.
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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 N	umbers for each ca	tegory listed below:
(Name of Fund as it will appear in t	tle of legislation)		
Name of Federal Funding Source(s)	From:		Amount:
ė	То:		Amount:
Name of State Funding Source(s):	From:		Amount:
,	То:		Amount:
Name of City of Jacksonville	From:		Amount:
Funding Source(s):	То:	į	Amount:
Name of In-Kind Contribution(s):	From:		Amount:
realite of in raile continuation(s).	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.) FDOT will, at no cost to the city, undertake a project known as a Multi-Use Trail-Timucuan Trail on SR 105 from milepost 0.941 to Milepost 1.398. Upon completion of construction, the city will operate, maintain and repair the improvements, which will not introduce any new effort regarding maintenance and repairs, barring unforeseen conditions. ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each. **ACTION ITEMS:** Yes No Justification of Emergency: If yes, explanation must include detailed nature of **Emergency?** Χ emergency. Federal or State Explanation: If yes, explanation must include detailed nature of mandate Χ including Statute or Provision. Mandate?

Fiscal Year Carryover?		Note: If yes, note must include explanation of all-year subfund carryover language.
CIP Amendment?		Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement X 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?
		Public Works and Parks and Recreation will provide project oversight. OGC and Risk Management have reviewed the request.
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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: justification, and code provisions		pose / Check List. If "Yes" please provide detail by attaching each.
ACTION ITEMS: Yes N	0_	·
Continuation of Grant?	۲	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?
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Surplus Property Certification?	×	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 generating
1 2	
Division Chief:	(signature) Date: 2/14/2016
Prepared By: Van We	Date: 2-13-19
	(signature)

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:	William J. Joyce, P.E. Director of Operations, Public Works
	Initiating Department Representative (Name, Job Title, Department)
	Phone: 255 - 8710 E-mail: joyce@coj.net
Primary	Trimari or object, 12., Director or operatione, 1 abilitronic
Contact:	(Name, Job Title, Department)
	Phone: 255 - 8710 E-mail: joyce@coj.net
CC:	Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor
	904-630-1825 E-mail: <u>jelsbury@coj.net</u>
	A BE
COUN	CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
To	Paggy Sidman Office of General Counsel St. James Suite 480
То:	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647 E-mail: psidman@coj.net
To: From:	Phone: 904-630-4647 E-mail: psidman@coj.net
	Phone: 904-630-4647 E-mail: psidman@coj.net Initiating Council Member / Independent Agency / Constitutional Officer
From:	Phone: 904-630-4647 E-mail: psidman@coj.net
From: Primary	Phone: 904-630-4647 E-mail: psidman@coj.net Initiating Council Member / Independent Agency / Constitutional Officer Phone: E-mail:
From: Primary	Phone: 904-630-4647
From: Primary Contact:	Phone: 904-630-4647 E-mail: psidman@coj.net Initiating Council Member / Independent Agency / Constitutional Officer Phone: E-mail: (Name, Job Title, Department) Phone: E-mail:
From: Primary	Phone: 904-630-4647
From: Primary Contact:	Phone: 904-630-4647 E-mail: psidman@coj.net Initiating Council Member / Independent Agency / Constitutional Officer Phone: E-mail: (Name, Job Title, Department) Phone: E-mail:
From: Primary Contact:	Phone: 904-630-4647
From: Primary Contact: CC:	Phone: 904-630-4647
From: Primary Contact: CC: Legislati approvin	Phone:
From: Primary Contact: CC: Legislati approvin	Phone: 904-630-4647 E-mail: psidman@coj.net Initiating Council Member / Independent Agency / Constitutional Officer Phone: E-mail: (Name, Job Title, Department) Phone: E-mail: Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor 904-630-1825 E-mail: jelsbury@coj.net ion from Independent Agencies requires a resolution from the Independent Agency Board agency Action Item: Yes No
From: Primary Contact: CC: Legislati approvin	Phone:

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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