

# LEGISLATIVE FACT SHEET

DATE: 01/10/19

BT or RC No: BT19-057  
(Administration & City Council Bills)

SPONSOR: Neighborhoods Department/Environmental Quality Division/Environmental Protection Board  
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation: James Richardson

Provide Name: James Richardson, EPB Administrator

Contact Number: (904) 255-7213

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

Support for the McCoys Creek Habitat Restoration Project is needed to assist in the development of a conceptual design for restoring the stream and wetland habitat of McCoys Creek. The goal of the plan is to provide natural channel design and bioengineering treatments for restoring approximately 2.8 miles of McCoys Creek from Hollybrook Park to the St. Johns River. The McCoys Creek Habitat Restoration will serve as a demonstration project for the City, region and beyond in the implementation of natural channel design and the associated water quality benefits.

**APPROPRIATION: Total Amount Appropriated \$84,600.00 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: Environmental Protection Board Trust Fund Fund Balance	Amount: \$84,600.00
	To: Environmental Protection Board Trust Fund	Amount: \$84,600.00
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 funds will come from the Environmental Protection Board Trust Fund, Fund Balance, to be used to support a demonstrative environmental project. No match is required. The funding will be available through September 30, 2021.

**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.

Through September 30, 2021

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

The Neighborhoods Department will provide oversight. The proposed MOU is attached to memorialize the agreement. The Office of General Counsel has approved the MOU.

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?	<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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Reporting Requirements?	<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

An annual report is to be submitted September 15 on the plan and implementation is required by the EPB through September 30, 2021.

Division Chief: Melissa M-Long  
(signature)

Date: 1/10/2019

Prepared By: \_\_\_\_\_  
(signature)

Date: 1/10/2019

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: Stephanie Burch, Esq., Director, Neighborhoods Department

(Name, Job Title, Department)

Phone: 255-8902

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

From: Melissa M. Long, P.E., Chief, Environmental Quality Division

Initiating Department Representative (Name, Job Title, Department)

Phone: 255-7101

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

Primary Contact: Melissa M. Long, P.E., Chief, Environmental Quality Division

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Phone: 255-7101

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

CC: Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor

Phone: 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

Phone: 904-630-1825

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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**