Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Madeira Beach Lighting Project

2. Date of Submission: 02/06/2017

3. House Member Sponsor: Kathleen Peters

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? Yes

 If answer to 4a is ?NO? skip 4b and 4c and proceed to 4d
- b. What is the most recent fiscal year the project was funded? 2016-17
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request (Note that column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in column G):

FY:	Input Prior Year Appropriation for this project		Develop New Funds Request			
	for FY 2016-17			for FY 2017-18		
	(If appropriated in 2016-17 enter the			(Requests for additional RECURRING funds are prohibited. Any additional		
	approp	riated amount, e	even if vetoed.)	Nonrecurring funding requested to supplement recurring funds in the base will		
				result in the base recurring amount being converted to Nonrecurring .)		
Column:	Α	В	С	D	E	F
Funds	Prior Year		Total Funds	Recurring Base	Additional	TOTAL Nonrecurring Request
Description:	Recurring	Prior Year	Appropriated	Budget	Nonrecurring	(Will equal the amount from the Recurring base in
	Funds	Nonrecurring		(Will equal non-	Request	Column D to be CONVERTED to Nonrecurring plus
		Funds	(Recurring plus	vetoed amounts		the Additional Nonrecurring Request in Column E.
			Nonrecurring:	provided in Column		These funds will be appropriated non-recurring if
			column A + column	A)		funded in the House Budget or the Final Conference
			В)			Report on the budget.)
Input		350,000	350,000		500,000	500,000
Amounts:						

5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2017-18? No 5a. If yes, which state agency?

5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? For example, if the requested issue pertains to services provided to inmates at correctional facilities, the Department of Corrections would be the most appropriate state agency. Department of Economic Opportunity

- 6. Requester:
 - a. Name: <u>Shane Crawford</u>b. Organization: City Manager
 - c. Email: scrawford@madeirabeachfl.gov
 - d. Phone #: (727)391-9951
- 7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):
 - a. Name: <u>Shane Crawford</u>b. Organization: City Manager
 - c. Email: scrawford@madeirabeachfl.gov
 - d. Phone #: (727)391-9951
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: Alan Suskey
 - b. Firm: Suskey Consulting
 - c. Email: as@suskeyconsulting.com
 - d. Phone #: (850)510-8314
- 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):
 - a. Name: City of Madeira Beach
 - b. County (County where funds are to be expended): Pinellas
 - c. Service Area (Counties being served by the service(s) provided with funding): Pinellas
- 10. What type of organization is the entity that will receive the funds? (Select one)
 - O For Profit
 - O Non Profit 501(c) (3)
 - O Non Profit 501(c) (4)
 - Local Government

O Univers	sity or College
O Other (Please describe

11. What is the specific purpose or goal that will be achieved by the funds being requested?

The funds will be used to replace existing lighting which is not energy efficient and causes ?light pollution? into area neighborhoods. New, innovative lighting will be used to prevent energy issues and light pollution issues.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. F) Enter ?0? if request is zero for the category
Administrative Costs:		
□a. Executive Director/Project Head Salary and Benefits		
□b. Other Salary and Benefits		
☑c. Expense/Equipment/Travel/Supplies/Other	Purchase of lighting equipment	425,000
☑d. Consultants/Contracted Services/Study	Instillation	75,000
Operational Costs:		
□e. Salaries and Benefits		
☐f. Expenses/Equipment/Travel/Supplies/Other		
☐g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
□h. Construction/Renovation/Land/Planning Engineering		
TOTAL		500,000

	For the Fixed Capital Costs requested with this issue, what type of ownership will the facility be under when complete? (In Question 12, if ?h. ed Capital Outlay? was not selected, question 13 is not applicable) N/A
14.	Is the project request an information technology project? No
	Is there any documented show of support for the requested project in the community including public hearings, letters of support, major anizational backing, or other expressions of support? Yes
	15a. Please Describe: Light pollution is a common and documented complaint from citizens in proximity to the centre.
16.	Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served? Yes
	16a. Please Describe: The city centre was a recently constructed \$12M project including a much needed city hall, fire station, and recreation area. The lights were studied and shown to need replacement. The budget did not allow for replacement at the time.
17.	Will the requested funds be used directly for services to citizens? Yes
	17a. Describe the target population to be served. Select all that apply to the target population: □Elderly persons □Persons with poor mental health □Persons with poor physical health □Jobless persons □Economically disadvantaged persons □At-risk youth □Homeless □Developmentally disabled □Physically disabled □Physically disabled □Drug users (in health services)

□Preschool students
☐Grade school students
☐High school students
□University/college students
□Currently or formerly incarcerated persons
□Drug offenders (in criminal Justice)
□Victims of crime
☑Other (Please describe): All citizens
17b. How many in the target population are expected to be served? O< 25
O25-50
O25-50
O51-100
O51-100
O51-100 O101-200

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select all that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit	
□Improve physical health			
☑Improve mental health	Exercising and Social interaction reduce stress and anxiety.	Increased attendance and Enrollment.	
☑Enrich cultural experience	The City Centre holds numerous concerts throughout the year and the lighting is an issue during many of the events.	Increased bookings and attendance.	
□Improve agricultural production/promotion/education			
☑Improve quality of education	The City Centre has outdoor classrooms for Children?s Education	Increased attendance and enrollment.	

	programs.	
☑Enhance/preserve/improve environmental or fish and wildlife quality	We are undergoing planning for a fishing pier that will be lit by this lighting package. Boating and fishing classes will be taught there.	Attendance and enrollment.
□Protect the general public from harm (environmental, criminal, etc.)		
□Improve transportation conditions		
☑Increase or improve economic activity	The sports complex is used by far more NCAA and travel sports team than ever imagined. Increased and improved lighting will assist in further recruitment of these events.	Attendance and enrollment.
□Increase tourism		
□Create specific immediate job opportunities		
□Enhance specific individual?s economic self sufficiency		
□Reduce recidivism		
□Reduce substance abuse		
□Divert from Criminal/Juvenile justice system		
□Improve wastewater management		
□Improve stormwater management		
□Improve groundwater quality		
□Improve drinking water quality		
□Improve surface water quality		

Other (Please describe):		
--------------------------	--	--

19. Provide the total cost of the project for FY 2017-18 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total (Automatically Calculates)	Are the other sources of funds guaranteed in writing?
Amount Requested from the State in this Appropriations Project Request:	500,000	50.0%	N/A
2. Federal:	0	0.0%	No
State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	500,000	50.0%	No
5. Other:	0	0.0%	No
TOTAL	1,000,000	100%	

20. Is this a multi-year project requiring funding from the state for more than one year? $\underline{\text{No}}$