Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

- 1. Title of Project: Treasure Island Causeway Multimodal Improvements
- 2. Date of Submission: <u>01/09/2017</u>
- 3. House Member Sponsor: <u>Kathleen Peters</u> Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? <u>No</u> 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?
- c. Were the funds provided in the most recent fiscal year subsequently vetoed?
- 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 for FY 2016-17 (If appropriated in 2016-17 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2017-18 (Requests for additional RECURRING funds are prohibited. Any additional Nonrecurring funding requested to supplement recurring funds in the base will result in the base recurring amount being converted to Nonrecurring .)		
Column:	А	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
			B)			Report on the budget.)
Input					1,499,390	1,499,390
Amounts:						

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2017-18? No5a. 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 Transportation

6. Requester:

- a. Name: Robert Minning
- b. Organization: City of Treasure Island
- c. Email: rminning@mytreasureisland.org
- d. Phone #: <u>(727)547-4575</u>

7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):

- a. Name: <u>Reid Silverboard</u>
- b. Organization: City of Treasure Island
- c. Email: citymanager@mytreasureisland.org
- d. Phone #: (727)547-4575
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: <u>None</u>
 - b. Firm: <u>None</u>
 - c. Email:
 - d. Phone #:

9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):

- a. Name: City of Treasure Island
- 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 University or College O Other (Please describe)

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

Reconstruction of a portion of the Treasure Island Causeway, including rebuilding the west bound lanes, milling and resurfacing of the east bound lanes, installation of curb and gutter for stormwater drainage in conjunction with a City of St. Petersburg project to construct a multi-use bicycle and pedestrian trail along the same section of the Causeway.

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		
☑d. Consultants/Contracted Services/Study	Engineering for design and CEI	182,530
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	Construction cost for resurfacing and installation of curb and gutters	1,316,860
TOTAL		1,499,390

13. 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. Fixed Capital Outlay" was not selected, question 13 is not applicable)

OFor Profit

ONon Profit 501(c) (3)

ONon Profit 501(c) (4)

⊙Local Government (e.g., police, fire or local government buildings, local roads, etc.)

OState agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system,

etc.)

OOther (Please describe)

14. Is the project request an information technology project?

<u>No</u>

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

<u>Yes</u>

15a. Please Describe:

Numerous public meetings have been held over the course of the last decade regarding the maintenance of the Causeway. This project will facilitate a long standing efford to resolve the difficulties of one city having responsibilities for operation and maintenance of a major roadway within the jurisdiction of another.

- 16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served? <u>No</u>
- 17. Will the requested funds be used directly for services to citizens? $\underline{\text{Yes}}$

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
□ 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)

17b. How many in the target population are expected to be served?

O< 25 O25-50 O51-100 O101-200 O201-400 O401-800 ⊙>800

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	Number of users of the trail	Biennial counts
□Improve mental health		
□Enrich cultural experience		
□Improve agricultural production/promotion/education		
□Improve quality of education		

☑Enhance/preserve/improve environmental or fish and wildlife quality	NPDES water quality testing	Storm drainage improvements to improve surface water quality	
☑Protect the general public from harm (environmental, criminal, etc.)	Number of pedestrian/bike/car crashes	Police stats	
☑Improve transportation conditions	Users of the facility	Safer roadway cooridor	
□Increase or improve economic activity			
☑Increase tourism	Improve flow of people between trail, beach, and St Petersburg	Direct connection between Pinellas Trail and City Beach Trail and Gulf Blvd	
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	Reduction in complaints	Reduce surface flooding of roadway	
☑Improve groundwater quality	N/A	Improve groundwater quality	
□Improve drinking water quality			
☑Improve surface water quality	NPDES Program Reporting	Improve quality of discharge to Boca Ciega Bay	
□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	Are the other sources of		
	Page 6 of 7				

		(Automatically Calculates)	funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	1,499,390	43.1%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	679,475	19.5%	No
4. Local:	0	0.0%	No
5. Other:	1,296,915	37.3%	No
TOTAL	3,475,780	100%	

20. Is this a multi-year project requiring funding from the state for more than one year?

<u>No</u>