Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Fuel/Fleet Management System Upgrade

2. Date of Submission: 02/03/2017

3. House Member Sponsor: Halsey Beshears

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? No 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 Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated (Recurring plus Nonrecurring: column A + column B)	Recurring Base Budget (Will equal non- vetoed amounts provided in Column A)	Additional Nonrecurring Request	TOTAL Nonrecurring Request (Will equal the amount from the Recurring base in Column D to be CONVERTED to Nonrecurring plus the Additional Nonrecurring Request in Column E. These funds will be appropriated non-recurring if funded in the House Budget or the Final Conference Report on the budget.)
Input Amounts:					1,250,000	1,250,000

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 Transportation

- 6. Requester:
 - a. Name: Dan C. Philips
 - b. Organization: Syntech Systems, Inc./Fuelmaster
 - c. Email: dan.philips@myfuelmaster.com
 - d. Phone #: (800)888-9136
- 7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):
 - a. Name: Dan C. Philips
 - b. Organization: Syntech Systems, Inc./Fuelmaster
 - c. Email: dan.philips@myfuelmaster.com
 - d. Phone #: (800)888-9136
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: <u>Jim Naff</u> b. Firm: SBM
 - c. Email: jnaff@smithbryanandmyers.com
 - d. Phone #: (850)224-5081
- 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):
 - a. Name: FDOT
 - b. County (County where funds are to be expended): Statewide
 - c. Service Area (Counties being served by the service(s) provided with funding): <u>Statewide</u>
- 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)
 - O Local Government

O University or College	
⊙ Other (Please describe	State Agency

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

System efficiency with Fuel and Fleet Management departments as well as reduction of driver incidents

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

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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							
Operational Costs:							
☐e. Salaries and Benefits							
☑f. Expenses/Equipment/Travel/Supplies/Other	Automotive information module	1,100,000					
☑g. Consultants/Contracted Services/Study	Installation and linkage	150,000					
Fixed Capital Construction/Major Renovation:							
☐h. Construction/Renovation/Land/Planning Engineering							
TOTAL		1,250,000					

^{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)

N/A

14. Is the project request an information technology project? $\underline{\text{No}}$

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?

Yes

15a. Please Describe:

Two pilot test sites are currently running for FDOT with successful results

- 16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

 No
- 17. Will the requested funds be used directly for services to citizens? No

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		
□Enrich cultural experience		
□Improve agricultural production/promotion/education		
□Improve quality of education		
□Enhance/preserve/improve environmental or fish and wildlife quality		
□Protect the general public from harm (environmental, criminal, etc.)		

☑Improve transportation conditions	Fewer unplanned maintenance events causing unexpected downtime	Number of unexpected downtime vehicles occurring current year to those occurring after installation
□Increase or improve economic activity		
□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:	1,250,000	100.0%	N/A

2. Federal:	0	0.0%	No
State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	0	0.0%	No
5. Other:	0	0.0%	No
TOTAL	1,250,000	100%	

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