Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: University of West Florida Alice Hall-Robinson Farmstead

2. Date of Submission: 02/02/2017

3. House Member Sponsor: Jayer Williamson

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:	(If app	for FY 2016 for FY 2016 propriated in 2010 priated amount, e	6-17 enter the	Nonrecurring fun	dditional RECU ding requested	o New Funds Request for FY 2017-18 RRING funds are prohibited. Any additional to supplement recurring funds in the base will mount being converted to Nonrecurring .)
Column:	Α	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:					500,000	500,000

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.

Board of Governors

Requester:	6.	Req	ues	ter:
------------------------------	----	-----	-----	------

a. Name: Andrew Romer

b. Organization: University of West Florida

c. Email: <u>aromer@uwf.edu</u> d. Phone #: (850)474-2200

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

a. Name: Andrew Romer

b. Organization: University of West Florida

c. Email: <u>aromer@uwf.edu</u> d. Phone #: (850)474-2200

8. If there is a registered lobbyist, fill out the lobbyist information below.

a. Name: Andrew Romer

b. Firm: University of West Florida

c. Email: <u>aromer@uwf.org</u> d. Phone #: (850)474-2200

- 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):
 - a. Name: University of West Florida
 - b. County (County where funds are to be expended): Escambia, Santa Rosa
 - c. Service Area (Counties being served by the service(s) provided with funding): Escambia, Okaloosa, Santa Rosa
- 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

University	sity or College
O Other (Please describe)

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

Capital improvements to the Alice Hall-Robinson Farmstead including site restoration, architectural and engineering services, barn restoration, and installation of a nature trail.

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		
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	Architectural and engineering services, Site restoration, Barn construction/Reconstruction, Natural trail development	500,000

	TOTAL		500,000
--	-------	--	---------

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)

OFor Profit

ONon Profit 501(c) (3)

ONon Profit 501(c) (4)

- OLocal Government (e.g., police, fire or local government buildings, local roads, etc.)
- •State 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?

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?

No

- 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?

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	The nature trail will promote walking and outdoor activity	Track the number of visitors.
□Improve mental health		
☑Enrich cultural experience	The historic Farmstead and subsequent educational programming	Track the number of programs presented as well as the number of

	will give visitors a view into what rural agrarian life was like in early Northwest Florida. The site and barn will serve as a venue for community events.	participants.
☑Improve agricultural production/promotion/education	Interpreting historic farm life helps promote a greater understanding and appreciation for agriculture.	Track the number of programs presented as well as the number of participants.
☑Improve quality of education	Educational programming and lesson plans will be created around the story of the farm. UWF will offer tours, field trips, and public programming designed to educate on farming and Florida's rich history.	Track the number of programs presented as well as the number of participants.
☑Enhance/preserve/improve environmental or fish and wildlife quality	The nature trail will highlight the flora and fauna in the area promoting a greater appreciation for the preservation of both.	Track the number of people who use the trail.
□Protect the general public from harm (environmental, criminal, etc.)		
□Improve transportation conditions		
☑Increase or improve economic activity	Having a museum facility within the area will promote tourism as well as benefit the local economy by providing a place for visitors to come and enjoy the history of the area.	Track the number of visitors and gauge their economic impact.
☑Increase tourism	The historic Farmstead will promote tourism by attracting cultural heritage and agriculture tourists to the region	Track the number of visitors by zip code.

☑Create specific immediate job opportunities	Once the historic Farmstead is opened it will create need to be staffed by two full time positions and four part time positions.	Positions will be filled.
□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):

Tovide the total cost of the project for 11 2017 18 from all 3	ources or ramaning (Linter 10	. Il dilloditt is zeroj.	
Type of Funding	Amount	Percent of Total	Are the other sources of
		(Automatically Calculates)	funds guaranteed in
			writing?
1. Amount Requested from the State in this Appropriations	500,000	100.0%	N/A
Project Request:			
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d,	0	0.0%	No
Column F)			

4. Local:	0	0.0%	No
5. Other:	0	0.0%	No
TOTAL	500,000	100%	

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