

Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Autonomous Vehicle Deployment Initiative
2. Date of Submission: 02/07/2017
3. House Member Sponsor: Mike Miller
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 <i>(If appropriated in 2016-17 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2017-18 <i>(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 .)</i>		
	Column:	A	B	C	D	E
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget <i>(Will equal non-vetoed amounts provided in Column A)</i>	Additional Nonrecurring Request	TOTAL Nonrecurring Request <i>(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.)</i>
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. Department of Transportation

6. Requester:

- a. Name: Robbie Diamond
- b. Organization: Securing America?s Future Energy
- c. Email: rdiamond@secureenergy.org
- d. Phone #: (202)461-2370

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

- a. Name: Robbie Diamond
- b. Organization: Securing America?s Future Energy
- c. Email: rdiamond@secureenergy.org
- d. Phone #: (202)461-2370

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

- a. Name: Brad Burleson
- b. Firm: Ballard Partners
- c. Email: brad@ballardfl.com
- d. Phone #: (850)545-2219

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

- a. Name: Securing America?s Future Energy
- b. County (County where funds are to be expended): Statewide
- c. Service Area (Counties being served by the service(s) provided with funding): Statewide

10. What type of organization is the entity that will receive the funds? (Select one)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government

- University or College
- Other (Please describe) Local partners as appropriate

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

FDOT, together with cities and/or localities shall create and launch an initiative to test and deploy autonomous vehicles in Florida, with particular emphasis on the utilization of autonomous vehicles to enhance mobility for the elderly and disabled population. The project shall be designed in a manner to maximize social and economic value to the state, including through increased corporate investment in Florida, and to its residents. The pilot(s) shall be done in furtherance of existing Florida

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:		
<input checked="" type="checkbox"/> a. Executive Director/Project Head Salary and Benefits	Florida-based Project Lead	0
<input checked="" type="checkbox"/> b. Other Salary and Benefits	a+c	40,000
<input checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	Expenses, Travel and Supplies	0
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	Florida-based Project Lead; Communications and Digital Media; Policy and Program Analyst; National Support; Stakeholder and Coalition Manager	0
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Expenses, Travel and Supplies	0
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	Data Collection	460,000

Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
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)

N/A

14. Is the project request an information technology project?

Yes

14a. Will this information technology project be managed within a state agency to support state agency program goals?

Yes

14b. What is the total cost (all years) to design and build the project?

500000

14c. What are the ongoing (annual recurring) maintenance and operation costs once the project is completed?

n/a

14d. Can the state agency fund the ongoing annual recurring costs within its current operating budget?

Yes

14e. What are the specific business objectives or needs the IT project is intended to address?

This initiative will allow Florida to build on its pro-innovation legislative framework, and the U.S. Department of Transportation?s designation of Central Florida Automated Vehicle Partners as an autonomous vehicle proving ground, to position the state for leadership on autonomous vehicle deployment and bring new investment to the state. A deployment project targeting enhanced mobility for the elderly will also allow Florida to help maximize the social value of AV deployment to its residents. {

14f. Based upon the identified business objectives or needs, what are the success factors that must be realized in order for the state agency to consider the proposed IT project a success?

1. The number of stakeholder meetings; 2. Industry?s commitment to deployment in Florida; 3. Deployment event(s); 4. Behavioral changes, including analysis of existing consumer attitudes toward AVs, measured against post-deployment attitudes; 5. Autonomous miles

driven; 6. Analysis of improved mobility for the elderly/disabled by measuring pre-deployment miles/month vs. post-deployment autonomous miles; 7. Number of healthcare appointments missed by the elderly/disabled within the target communi

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?

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?

< 25

25-50

- 51-100
- 101-200
- 201-400
- 401-800
- ⊙>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
<input type="checkbox"/> Improve physical health		
<input type="checkbox"/> Improve mental health		
<input checked="" type="checkbox"/> Enrich cultural experience	Ease of Transportation; Ability to access cultural experiences	Autonomous miles traveled
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input type="checkbox"/> Improve quality of education		
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)		
<input checked="" type="checkbox"/> Improve transportation conditions	Ease and opportunity for Transportation; Increased transportation options;	Autonomous miles traveled and participant survey data
<input checked="" type="checkbox"/> Increase or improve economic activity	Increased investment; Access to jobs	Participant survey data; Destinations of autonomous miles traveled
<input type="checkbox"/> Increase tourism		
<input type="checkbox"/> Create specific immediate job opportunities		

<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Enhanced mobility for elderly and disabled	Autonomous miles traveled; Participant survey data
<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		
<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		
<input type="checkbox"/> 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?
1. Amount Requested from the State in this Appropriations Project Request:	500,000	100.0%	N/A
2. Federal:	0	0.0%	No
3. 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	500,000	100%	

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

No