

# Appropriations Project Request - Fiscal Year 2017-18

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: Coral Disease Water Quality Monitoring Program

2. Date of Submission: 02/07/2017

3. House Member Sponsor: Kristin Jacobs

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:	A	B	C	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)	<b>Additional Nonrecurring Request</b>	<b>TOTAL Nonrecurring Request</b> (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:					2,150,000	2,150,000

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 Environmental Protection

6. Requester:

- a. Name: Ken; Kathy Banks; Fitzpatrick
- b. Organization: Broward County and Martin County
- c. Email: kbanks@broward.org; kfitzpat@martin.fl.us
- d. Phone #: (954)519-1207

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

- a. Name: Ken; Kathy Banks; Fitzpatrick
- b. Organization: Broward County and Martin County
- c. Email: kbanks@broward.org; kfitzpat@martin.fl.us
- d. Phone #: (954)519-1207

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

- a. Name: Devon; Marty;
- b. Firm: Martin County; Broward County; Ballard Partners
- c. Email: dwest@martin.fl.us; mcassini@broward.org; carol@ballardfl.com
- d. Phone #: (321)243-2270

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

- a. Name: Florida Department of Environmental Protection
- b. County (County where funds are to be expended): Broward, Martin, Miami-Dade, Palm Beach
- c. Service Area (Counties being served by the service(s) provided with funding): Broward, Martin, Miami-Dade, Palm Beach

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) State Agency owned

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

The project will assess changes in coastal water quality that result from episodic events and improve predictive capacity for future scenarios. It will also provide data to evaluate the potential benefits for ocean water quality, coral reefs, and fish communities that result from watershed management actions and investments in watershed restoration. The overall goal is to provide data and information for enhanced adaptive management for ongoing and proposed regional restoration and conservation

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 type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> b. Other Salary and Benefits		
<input type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	High resolution monthly water quality sampling at 100 sites (inlets and ocean outfalls) throughout the northern Florida Reef Tract; Purchase, installation, and maintenance of 2 Land/Ocean Biogeochemical Observatories, 44 offshore salinity and temperature	1,650,000

	sensors, 6 acoustic fish stations; laboratory analyses for LOBOs and fish acoustics, data storage and processing, reporting and scientific expertise	
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	FDEP Coastal and Aquatic Managed Areas to fund the coordination and execution of a coral disease response program. Components of the program should include coral tissue sampling and laboratory analysis for histology and epidemiology, data warehousing and processing, regular report writing and the creation of public outreach and education products.	500,000
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		2,150,000

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?

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:

List of partner associations currently assisting in various disease event response activities: Broward County, Coral Restoration Foundation, Cry of the Water, Florida Aquarium, Florida Atlantic University, Florida Department of Environmental Protection, Florida Fish and Wildlife Conservation Commission, Florida International University, George Mason University, Martin County, Miami-Dade County, Mote Marine Laboratory, National Oceanic and Atmospheric Administration (Coral Reef Conservation Progr

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:

Completed during the 2016 summer, the Our Florida Reefs (OFR) program, a community planning process for southeast Florida's coral reefs, designed and used public involvement to generate grassroots recommendations and issued 68 Management Actions for coral reefs. The Southeast Florid Intergovernmental Coastal Ocean Task Force (COTF), convened to review management strategies and agency assistance in the implementation of certain management actions, issued their management recommendations in 2015.

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
<input type="checkbox"/> Improve physical health		
<input type="checkbox"/> Improve mental health		
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input type="checkbox"/> Improve quality of education		
<input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality	This imminent threat requires action to effectively direct federal and State efforts to reduce and/or eliminate local threats to our coral reefs and to improve coral resilience and survival during bleaching and disease events.	This project will be conducted over an 18 month time period to allow sufficient lead time for supply acquisition, 12 months of tissue sample and data collection as well as 4 months of data analysis and final

		report writing.
<input type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)		
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	Socioeconomic studies in the Southeast Florida Coral Reef Initiative (SEFCRI) region were conducted in 2002-2004 and showed that reefs within the region generate \$3.9 billion in sales annual. The study is currently being updated.	An updated socioeconomic study is being conducted currently. Monitoring of the health of the reefs and increase in local revenues associated with reef activities will be assessed.
<input checked="" type="checkbox"/> Increase tourism	The coral reefs between the St. Lucie Inlet and Biscayne Bay provide one of the most important economic benefits and tourism activity within the region. A healthy coral reef ecosystem is beneficial to tourism within the region.	An updated socioeconomic study is being conducted currently. Monitoring of the health of the reefs and increase in local revenues associated with reef activities will be assessed.
<input type="checkbox"/> Create specific immediate job opportunities		
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<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 checked="" type="checkbox"/> Improve surface water quality	A measure of benefit will lead to recommendations on surface water and wastewater management to enhance economic services.	Will be able to identify inlet contributing areas of elevated pollutants that can be addressed through management recommendations
<input type="checkbox"/> Other (Please describe): Baseline understand health of the reef		

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:	2,150,000	91.5%	N/A
2. Federal:	200,000	8.5%	Yes
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
<b>TOTAL</b>	<b>2,350,000</b>	<b>100%</b>	

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

Yes

20a. How much state funding would be requested after 2017-18 over the next 5 years?

☐ <1M

☐ 1-3M

☒ >3-10M

☐ >10M

20b. How many additional years of state support do you expect to need for this project?

☐ 1 year

☐ 2 years

☐ 3 years

☐ 4 years

☒ ≥ 5 years

20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select ?ongoing activity?.

☒ ongoing activity ? no total cost

☐ <1M

☐ 1-2M

☐ >2-3M

☐ >3-10M

☐ >10M