

Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Pompey Park Community Center Expansion
2. Date of Submission: 02/03/2017
3. House Member Sponsor: Al Jacquet
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:					4,000,000	4,000,000

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 Economic Opportunity

6. Requester:

- a. Name: Suzanne Fisher
- b. Organization: City of Delray Beach
- c. Email: fisher@mydelraybeach.com
- d. Phone #: (561)243-7251

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

- a. Name: Suzanne Fisher
- b. Organization: City of Delray Beach
- c. Email: fisher@mydelraybeach.com
- d. Phone #: (561)243-7251

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

- a. Name: Mat Forrest
- b. Firm: Ballard Partners
- c. Email: Mat@Ballardfl.com
- d. Phone #: (561)253-7251

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

- a. Name: City of Delray Beach
- b. County (County where funds are to be expended): Palm Beach
- c. Service Area (Counties being served by the service(s) provided with funding): 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)

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

The specific goal of this project is to improve the health and welfare of the NW/SW Delray Beach neighborhoods through increased recreational, educational, and leisure opportunities. Sub-goals include: 1.) an overall reduction in water related deaths through increased aquatic/swim lessons, 2.) increase graduation rate through outcome based education after-school and summer programs, 3.) reduce neighborhood crime and recidivism through outcome based programming for 13 - 25 year olds.

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 checked="" type="checkbox"/> d. Consultants/Contracted Services/Study	Architectural and design services for community center expansion.	250,000
Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		
<input type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering	.	3,750,000

TOTAL		4,000,000
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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)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local 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.)
- Other (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?

Yes

15a. Please Describe:

Commitment from Delray Beach CRA through CIP funding and expressions of community support through Parks & Recreation Master Plan meetings.

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:

2016-217 Delray Beach Parks & Recreation Master Plan, Suzanne Ivan - WZA Project Manager, currently in-process. Report expected in February 2017.

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 checked="" type="checkbox"/> Improve physical health	Participants will meet or exceed 2008 Physical Activity Guideline for Americans for specific cardiorespiratory, metabolic, and musculoskeletal health, as published	Participant pre-activity evaluation, on-going assessment, and yearly health evaluation.

	by Office of Disease Prevention and Health Promotion (DPHP).	
<input checked="" type="checkbox"/> Improve mental health	Participants will meet or exceed 2008 Physical Activity Guideline for Americans for physical activity and anxiety symptom and depression disorders, as published by Office of Disease Prevention and Health Promotion (DPHP).	Coordination with Healthier Delray Beach to provide pre-activity mental health evaluation, on-going assessments, educational training, and yearly "mental health check-up."
<input checked="" type="checkbox"/> Enrich cultural experience	Increase cultural/art-based programming and experiences/events by 25% through collaborative efforts with community-based cultural providers.	Yearly cultural experience/event/program tracking, including total participant numbers.
<input checked="" type="checkbox"/> Improve agricultural production/promotion/education	Improvement in participant eating behaviors, including choosing healthier options at home, consuming more fruits and vegetables (+0.99 to +1.3 servings/day); consuming less unhealthy foods and sodas; and increasing physical activity, through implementation of curriculum based monthly agricultural/healthy food seminars.	Participant food consumption report as part of health assessments (voluntary self-reporting), tracking of number and attendance at monthly agricultural/food seminars.
<input checked="" type="checkbox"/> Improve quality of education	Reduced screen time and increased physical activity for participants.	Participant pre-activity evaluation of screen time usage in coordination with physical activity pre-assessment. On-going monitoring and self assessment/reporting.
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		

<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Increased recreation/physical/mental health opportunities for community by 25%.	Yearly program tracking and evaluation.
<input type="checkbox"/> Improve transportation conditions		
<input type="checkbox"/> Increase or improve economic activity		
<input checked="" type="checkbox"/> Increase tourism	Increase basketball tournament offerings to include 6 tournaments per year and 1 NBA sponsored basketball camp/clinic.	Yearly program tracking, participant tracking and room-nights associated with tournaments and clinics.
<input type="checkbox"/> Create specific immediate job opportunities		
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<input checked="" type="checkbox"/> Reduce recidivism	Provide GED training to a minimum of 20 offenders each year.	Yearly GED program tracking, participant referrals from Corrections, and on-going participant recidivism reporting for 5 years following completion of program.
<input checked="" type="checkbox"/> Reduce substance abuse	Increase substance abuse programs offerings (meetings) by 10%.	Monthly, quarterly, and yearly program participation reports.
<input checked="" type="checkbox"/> Divert from Criminal/Juvenile justice system	Increase overall juvenile program participation by 20% in first year of operation.	Monthly, quarterly, and yearly program participation reports.
<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:	4,000,000	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%	Yes
5. Other:	0	0.0%	No
TOTAL	4,000,000	100%	

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

No