

# Appropriations Project Request - Fiscal Year 2017-18

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: Indian River Shores Flood Control and Stormwater Treatment

2. Date of Submission: 02/07/2017

3. House Member Sponsor: Erin Grall

Members Copied:

### 4. DETAILS OF AMOUNT REQUESTED:

- 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*
- What is the most recent fiscal year the project was funded?
- Were the funds provided in the most recent fiscal year subsequently vetoed?
- 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>	<b>Additional Nonrecurring Request</b>	<b>TOTAL Nonrecurring Request</b> <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:					650,000	650,000

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: Robert Stabe
- b. Organization: Town of Indian River Shores
- c. Email: townmanager@irshores.com
- d. Phone #: (772)231-1771

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

- a. Name: Robert Stabe
- b. Organization: Town of Indian River Shores
- c. Email: townmanager@irshores.com
- d. Phone #: (772)231-1771

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

- a. Name: None
- b. Firm: None
- c. Email:
- d. Phone #:

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

- a. Name: Town of Indian River Shores
- b. County (County where funds are to be expended): Indian River
- c. Service Area (Counties being served by the service(s) provided with funding): Indian River

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?

With design and permitting complete, the Town of Indian River Shores requests \$650,000 (50% of a \$1,300,000 project) to raise the elevation of Old Winter Beach Road, a .6-mile road that connects to A1A and SR 510 as the only hurricane evacuation route for 500 residents. During the evacuation order and after Hurricane Matthew, the road remained flooded by 18-24 inches rainfall. The Town will construct a stormwater treatment train to remove 80% of nutrients before reaching the Indian River Lagoon.

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 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	Eliminate barrier flooding on Old Winter Beach Road, insure a safe hurricane evacuation route for 500	650,000

	residents, and removed 80% of harmful stormwater nutrients from entering the IR Lagoon.	
TOTAL		650,000

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)

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?

N/A

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:

Town Council members and residents shared their concerns of flooding on Old Winter Beach Rd and pollutant removal at meetings including : IR Shores Council Meeting on 12/15/16, 04/24/03, 01/09/86,11/16/16; by Indian River County Resolution 84-62 stating the County would ?take back? maintenance of OWBR should the Town desire; during a site visit County officials noted storm flooding on 07/06/16; viaemail correspondence from residents in February, March, April and June 2016.

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:

The Town hired an engineering firm to prepare a drainage study for project. It is entitled Preliminary Drainage Study for Old Winter Beach Road, prepared by Knight, McGuire & Associates, June 2002.

17. Will the requested funds be used directly for services to citizens?

N/A

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 checked="" type="checkbox"/> Improve mental health	Reduce residents concern about being trapped in their homes during major storms.	Record number of residents evacuating during any major storm system where the Town lies in its pathway.
<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	Reduced water pollution: TP, TN, contaminants	Water quality monitoring
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Remove noxious pollutants	Water quality monitoring
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	Increase sales tax by \$80,000 in sales tax revenue.	Reported revenues
<input type="checkbox"/> Increase tourism		
<input checked="" type="checkbox"/> Create specific immediate job opportunities	150 temporary jobs with project	Number of jobs

	construction	
<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 checked="" type="checkbox"/> Improve stormwater management	Reduced water pollution: TP, TN, eliminated standing water flooding the Town's roadways.	Water quality monitoring
<input checked="" type="checkbox"/> Improve groundwater quality	Reduced water pollution: TP, TN	Water quality monitoring
<input type="checkbox"/> Improve drinking water quality		
<input checked="" type="checkbox"/> Improve surface water quality	Reduced water pollution: TP, TN	Water quality monitoring
<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:	650,000	50.0%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	300,000	23.1%	Yes
4. Local:	350,000	26.9%	Yes

5. Other:	0	0.0%	No
TOTAL	1,300,000	100%	

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

No

21. What is the revenue source of ongoing operating funds?

Town's General Revenue Fund

22. Has local approval been given for ongoing operating funds?

Yes

23. Have you applied for alternative state funding?

- a. Wastewater Revolving Loan
- b. Drinking Water Revolving Loan
- c. Small Community Wastewater Treatment Grant
- d. Other (Please describe): SJRWMD Cost Share
- e. N/A

24. Has project been addressed in a local, regional, or state plan?

Yes

24a. If Yes, insert plan name and cite page numbers.

This project is listed in the Indian River County Local Mitigation Strategy Project Prioritization List, as Project 16, Town of Indian River Shores, Indian Lane Drainage Improvements, June 2016. It is referenced as supporting action plan in the Indian River Lagoon Comprehensive Conservation and Management Plan Update 2008 Update, page 19, Fresh & Stormwater Water Discharge Action Plan.

25. Is the project for a financially disadvantaged community?

No

26. What is the population economic status?

- a. Financially Disadvantaged Municipality
- b. Rural Area of Critical Economic Concern
- c. Rural Community Experiencing Economic Distress
- d. N/A

27. What is the status of planning?  
 a. Ready  
 b. Not Ready
28. What percentage of the planning process has been completed  
100%
29. What is the estimated planning completion date?  
N/A
30. What is the status of design?  
 a. Ready  
 b. Not Ready
31. What percentage of design has been completed?  
100%
32. What is the estimated design completion date?  
N/A
33. List all required permits.  
SJRWMD Environmental Resource Permit
34. What is the status of permitting?  
 a. Planned  
 b. Submitted  
 c. Received
35. What is the status of construction?  
 a. Ready  
 b. Not Ready
36. What percentage of construction has been completed?  
0%

37. What is the estimated completion date of construction?

5/19