

Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Sarasota County - Dona Bay Watershed Restoration Project

2. Date of Submission: 10/24/2017

3. House Member Sponsor: Joe Gruters

Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? Yes
If answer to 4a is ?No? skip 4b and 4c and proceed to 4d, Col. E
- b. What is the most recent fiscal year the project was funded? 2016-17
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2017-18 (If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2018-19 (Requests for additional RECURRING funds are prohibited.)		
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)	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds (Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)
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 2018-19? 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? Department of Environmental Protection

5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? Yes

5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

Denial of funding for items which fail to meet deliverables or performance measures.

6. Requester:

- a. Name: Scott Schroyer
- b. Organization: Sarasota County Public Utilities
- c. Email: sschroyer@scgov.net
- d. Phone #: (941)861-0661

7. Contact for questions about specific technical or financial details about the project:

- a. Name: Kelly Westover
- b. Organization: Sarasota County Public Utilities
- c. Email: kwestover@scgov.net
- d. Phone #: (941)650-1208

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: Rob Lewis
- b. Firm: Sarasota County Board of County Commissioners
- c. Email: rlewis@scgov.net
- d. Phone #: (941)444-9532

9. Organization or Name of entity receiving funds:

- a. Name: Sarasota County Public Utilities
- b. County (County where funds are to be expended): Sarasota
- c. Service Area (Counties being served by the service(s) provided with funding): Sarasota

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?

This funding will help Sarasota County work towards its stated program goals of reducing the volume of fresh water discharged to the tidal estuary of Dona Bay, pollutant (nutrient) load removal, and the rehydration of previously-impacted wetlands. This project is especially important in providing a buffering system to capture, retain, and treat the excess fresh water and pollutants that are normally flushed rapidly to tide following a tropical storm or hurricane event.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) 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	The requested funds will be used to offset a portion of the construction costs of a new pipeline from the southern terminus of Phase I to a 400-acre former shell rock mine that was excavated in the historical (pre-	4,000,000

	drainage modifications) path of Cow Pen Slough. Phase II of the project also involves reclamation and modification to the former mine and re-establishing the historical connection from Cow Pen Slough to the nearby Myakka River.	
TOTAL		4,000,000

13. For the Fixed Capital Costs requested with this issue (In Question 12, category ?h. Fixed Capital Outlay? was selected), what type of ownership will the facility be under when complete? (Select one correct option)

- ☐ 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:

The Dona Bay Restoration Project is supported by public policy and funding resolutions passed by the Sarasota County Board of County Commissioners and by the results and conclusions of the Dona Bay Watershed Management Plan prepared by the Southwest Florida Water Management District.

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 project is currently in Phase 2 of a three-phase program. The project budget has been developed by consultants in cooperation with the Southwest Florida Water Management District.

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 each Benefit/Outcome 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	Improve water quality in estuaries	Surface water quality monitoring
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Reduced post-storm pollution in estuaries	Surface water quality monitoring
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	Improved water quality at Venice Inlet, home to two popular recreation destinations (North Jetty and South Jetty County Parks)	Surface water quality monitoring; attendance/use counts at parks
<input checked="" type="checkbox"/> Increase tourism	Improved water quality at Venice Inlet, home to two popular tourist	Surface water quality monitoring; attendance/use counts at parks

	destinations (North Jetty and South Jetty County Parks)	
<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 checked="" type="checkbox"/> Improve stormwater management	Capture, treat, retain, and slowly release excess stormwater.	Stormwater volume and stage level monitoring
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input checked="" type="checkbox"/> Improve surface water quality	Reduce nutrients in estuaries	Surface water quality monitoring
<input type="checkbox"/> Other (Please describe):		

19. Provide the total cost of the project for FY 2018-19 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	4,000,000	49.2%	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:	4,125,000	50.8%	Yes
5. Other:	0	0.0%	No
TOTAL	8,125,000	100%	

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 2018-19 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

☐ 1-3M

☐ >3-10M

☒ >10M

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

Sarasota County Public Utilities Operating Budget

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)
- ☒ 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.

Dona Bay Watershed Management Plan (Sarasota County and SWFWMD)

25. Is the project for a financially disadvantaged community? (as defined in Chapter 62-552, F.A.C.)

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?

06/30/2015

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?
05/15/2016
33. List all required permits.
SWFWMD Environmental Resource Permit and SWFWMD Water Use 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?
04/30/2019