

Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Choctawhatchee and St Andrew Bay Estuary Programs

2. Date of Submission: 11/14/2017

3. House Member Sponsor: Mel Ponder

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, Col. E

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:

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? No

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.

No payment will be made for deliverables deemed unsatisfactory by the agency. In the event that a deliverable is deemed unsatisfactory, the grantee will re-perform the services needed for a satisfactory deliverable. If a satisfactory deliverable is not delivered within the allotted timeframe, the agreement may be terminated.?

6. Requester:

- a. Name: Commissioner Charles Windes
- b. Organization: Choctawhatchee Bay Estuary Coalition
- c. Email: kwindes@co.okaloosa.fl.us
- d. Phone #: (850)689-5050

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

- a. Name: Commissioner Charles Windes
- b. Organization: Choctawhatchee Bay Estuary Coalition
- c. Email: kwindes@co.okaloosa.fl.us
- d. Phone #: (850)689-5050

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

- a. Name: Sarah Busk
- b. Firm: Cardenas and Partners
- c. Email: sjb@cardenaspartners.com
- d. Phone #: (850)222-8900

9. Organization or Name of entity receiving funds:

- a. Name: Choctawhatchee Bay Estuary Coalition
- b. County (County where funds are to be expended): Bay, Calhoun, Gulf, Holmes, Jackson, Okaloosa, Walton, Washington
- c. Service Area (Counties being served by the service(s) provided with funding): Bay, Calhoun, Gulf, Holmes, Jackson, Okaloosa, Walton, Washington

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) The Choctawhatchee Bay EP interlocal agreement is authorized under Chapter 163.01 of F.S..

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

An Estuary Program is a non-regulatory program that would work to improve the waters, habitats, living resources and economies of the Choctawhatchee and St Andrew Bays watersheds. Water quality in these bays are critical components of our tourism economy, as the bays are both scenic and provide recreational opportunities for visitors and locals alike. We request \$4 million to start up estuary programs in both the Choctawhatchee and St. Andrew Bays watersheds.

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

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter ?? 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 checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	Office space, equipment, etc. over 4 years	400,000
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	2 Ex. Directors, 2 Lead Scientists, 2 Outreach/Grants person / 1 each for Choctaw and St Andrew, over 4 years	3,100,000
<input type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other		
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	Development of the CCMP, other studies to support CCMP	500,000

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

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:

Too numerous to list here. List can be provided, if desired

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?

No

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 and protect water quality necessary for healthy fish and wildlife habitat and associated economic benefits	Monitor water quality before and after specific, targeted projects.
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Alleviate or eliminate health related problems as the result of polluted surface water.	Monitor water quality before and after specific, targeted projects.
<input type="checkbox"/> Improve transportation conditions		
<input type="checkbox"/> Increase or improve economic activity		
<input type="checkbox"/> Increase tourism		
<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 type="checkbox"/> Improve surface water quality		
<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	88.9%	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:	500,000	11.1%	Yes
5. Other:	0	0.0%	No
TOTAL	4,500,000	100%	

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

No