Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Palm Beach County Tarpon Cove Phase II

2. Date of Submission: <u>10/25/2017</u>3. House Member Sponsor: Bill Hager

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.)			(Reque	Develop New Funds Request for FY 2018-19 sts for additional RECURRING funds a	re prohibited.)
Column:	Α	В	С	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:					1,000,000	1,000,000

- 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.

withholding of disbursement of the grant funds until the deliverables are completed.

6. Requester: a. Name: Rebecca DeLaRosa b. Organization: Palm Beach County c. Email: rdelarosa@pbcgov.org d. Phone #: (561)355-3451	
 7. Contact for questions about specific technical or financial details about the project: a. Name: <u>Chris Pettit</u> b. Organization: <u>Palm Beach County</u> c. Email: <u>cpettit@pbcgov.org</u> d. Phone #: <u>(941)549-2088</u> 	
 8. Is there a registered lobbyist working to secure funding for this project? a. Name: Rebecca DeLaRosa b. Firm: Palm Beach County c. Email: rdelarosa@pbcgov.org d. Phone #: (561)355-3451 	
 9. Organization or Name of entity receiving funds: a. Name: Palm Beach County Environmental Resources Management 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 	<u> </u>
 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) ④ Local Government ○ University or College ○ Other (Please describe) 	

11. What is the specific purpose	or goal that wil	I be achieved I	bv the funds	being requested
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The project will provide for the creation of estuarine habitat that will improve water quality, provide resiliency for upland parcels during storm events, and restore habitat for coastal species

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:		
□a. Executive Director/Project Head Salary and Benefits		
□b. Other Salary and Benefits		
□c. Expense/Equipment/Travel/Supplies/Other		
□d. Consultants/Contracted Services/Study		
Operational Costs:		
☐e. Salaries and Benefits		
☐f. Expenses/Equipment/Travel/Supplies/Other		
□g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
☑h. Construction/Renovation/Land/Planning Engineering	Fixed capital costs (construction activities)	1,000,000
TOTAL		1,000,000

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)

OFor Profit

et	ONon Profit 501(c) (3) ONon Profit 501(c) (4) OLocal Government (e.g., police, fire or local government buildings, OState agency owned facility (For example: college or university facietc.) OOther (Please describe)	-	, roads in the state transportation system,
	14. Is the project request an information technology project? N/A		
orga	15. Is there any documented show of support for the requested project in organizational backing, or other expressions of support? Yes	the community including public	c hearings, letters of support, major
	15a. Please Describe: The project was presented to the public and is supported at the in Neighborhood Association).	municipal level (City of West Pal	m Beach) and at the local level (El Cid
	16. Has the need for the funds been documented by a study, completed b $\underline{\text{No}}$	y an independent 3rd party, for	the area to be served?
	17. Will the requested funds be used directly for services to citizens? N/A		
18.	18. What benefits or outcomes will be realized by the expenditure of fund	s requested? (Select each Bene	fit/Outcome that applies)
		<u>·</u>	Describe the method for measuring level

10.	What benefits or outcome	3 Will be realized by	the expenditure o	Ji Tulius IC	questeu: (3c		Tient, Outcon	
12	What honotite or outcome	oc will he realized hv	the evapanditure o	nt tunde re	all Shatsaiin	lact aach Ra	notit/Outcom	10 that annlige)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
☑Improve physical health	Creation and restoration of estuarine habitat	Acreage of habitat created and/or enhanced
□Improve mental health		
□Enrich cultural experience		

□Improve agricultural production/promotion/education		
□Improve quality of education		
☑Enhance/preserve/improve environmental or fish and wildlife quality	Creation and enhancement of estuarine habitat	Habitat and biological monitoring
☑Protect the general public from harm (environmental, criminal, etc.)	creation of estuarine habitat helps to buffer upland properties from the impacts of storm surge during tropical events	reduction of upland flooding during storm events
□Improve transportation conditions		
□Increase or improve economic activity		
☑Increase tourism	Creation and enhancement of estuarine habitat	Increased passive recreational use of created and restored habitats
□Create specific immediate job opportunities		
□Enhance specific individual?s economic self sufficiency		
□Reduce recidivism		
□Reduce substance abuse		
□Divert from Criminal/Juvenile justice system		
□Improve wastewater management		
□Improve stormwater management		
□Improve groundwater quality		
□Improve drinking water quality		
☑Improve surface water quality	Creation and restoration of estuarine habitat	Water quality monitoring

□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?
Amount Requested from the State in this Appropriations Project Request:	1,000,000	50.0%	N/A
2. Federal:	0	0.0%	No
State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	1,000,000	50.0%	Yes
5. Other:	0	0.0%	No
TOTAL	2,000,000	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 red	quested after	2018-19 ov	ver the next 5	vears?

O<1M

⊙1-3M

O>3-10M

O>10M

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

O1 year

⊙2 years

O3 years

O4 years

O>= 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 be describes the total project cost. If funds requested are for ongoing services or for recurring activities, select ?ongoing activity?. Oongoing activity ? no total cost O<1M O1-3M O>3-10M ⊙>10M	est
21. What is the revenue source of ongoing operating funds? vessel registration fees	
22. Has local approval been given for ongoing operating funds? <u>Yes</u>	
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. Lake Worth Lagoon Management Plan	
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? Oa. Financially Disadvantaged Municipality Ob. Rural Area of Critical Economic Concern Oc. Rural Community Experiencing Economic Distress ⊙d. N/A	

27.	What is the status of planning? ⊙a. Ready Ob. Not Ready
28.	What percentage of the planning process has been completed? 75
29.	What is the estimated planning completion date? 06/01/2018
30.	What is the status of design? ⊙a. Ready ○b. Not Ready
31.	What percentage of design has been completed? 90
32.	What is the estimated design completion date? 01/01/2018
33.	List all required permits. FDEP Environmental Resource Permit (Permit No. 50-0354344-001-EI) issued 6-23-17 and U.S. Army Corps of Engineers Permit (No. SAJ-2017-1528) pending issuance
34.	What is the status of permitting? Oa. Planned Ob. Submitted ⊙c. Received
35.	What is the status of construction? ⊙a. Ready ○b. Not Ready
36.	What percentage of construction has been completed?

37. What is the estimated completion date of construction? 07/01/2020