Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: City of Safety Harbor Public Library Expansion

2. Date of Submission: <u>11/05/2019</u>3. House Member Sponsor: James Grant

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 2019-20 (If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2020-21 (Requests for additional RECURRING funds are 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:					2,000,000	2,000,000

- 5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2020-21? 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 State
 - 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 funding if not completed by set date

6. Requester: a. Name: Matthew Spoor b. Organization: City of Safety Harbor c. Email: mspoor@cityofsafetyharbor.com d. Phone #: (727)724-1414
 7. Contact for questions about specific technical or financial details about the project: a. Name: Matthew Spoor b. Organization: City of Safety Harbor c. Email: mspoor@cityofsafetyharbor.com d. Phone #: (727)724-1414
 8. Is there a registered lobbyist working to secure funding for this project? a. Name: None b. Firm: None c. Email: d. Phone #:
 9. Organization or Name of entity receiving funds: a. Name: <u>City of Safety Harbor</u> b. County (County where funds are to be expended): <u>Pinellas</u> c. Service Area (Counties being served by the service(s) provided with funding): <u>Hillsborough, Pasco, Pinellas</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 spe	ecific purpose	or goal that v	will be achieve	d by the	funds being	requested?

The Safety Harbor Public Library is located in downtown Safety Harbor. This project will construct a second story to a portion of the building for additional services and programming.

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	Construction of the second story	2,000,000
TOTAL		2,000,000

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

ONon Profit 501(c) (3)

ONon Profit 501(c) (4)

OLocal Government (e.g., police, fire or local government buildings, local roads, etc.)

OState agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)

OOther (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?

<u>Yes</u>

15a. Please Describe:

Safety Harbor City Commission, Safety Harbor Public Library Foundation, Safety Harbor Public Library Advisory Committee, Safety Harbor Friends of the Library, and the Residents of the City of Safety Harbor and Pinellas County.

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:

A consultant prepared a needs assessment study in 2008 when the Library was first expanded. The building was constructed so that it could hold a second story at a future date when additional demand was projected.

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

<u>Yes</u>

17a. What are the activities and services that will be provided to meet the purpose of the funds?

SPHL attracts a high number of visitors and organizations because of its educational and cultural programs, resources, and convenient meeting areas. Space cannot keep up with demand. Community groups and businesses wanting to use the facility are unable to schedule events because of library programs. Fiscal year 2018-19, library program attendance = 33,840, up 38% over the previous year.

17b. Describe the direct services to be provided to the citizens by the funding requested.

Expansion will serve the community with increased availability for programs, events, and meetings and concurrent library programs. Plans include classrooms for ESOL and technology training. Last fiscal year, 5,177 people from 60 external groups used our meeting space. 65% of program attendees live in other Pinellas County municipalities.

	, "the majority of the funds requested will serve these target populations or groups.")
Select all that apply to the target population:	
☑Elderly persons	
☑Persons with poor mental health	
☑Persons with poor physical health	
☑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	
☑General (The majority of the funds will benefit no	specific group)
□Other (Please describe)	
17d. How many in the target population are expecte	d to be served?
O< 25	
O25-50	
O51-100	
O101-200	
O201-400	
O401-800	
⊙>800	

	or outcome	

Benefit or Outcome

□Improve physical health		
☑Improve mental health	Additional meeting room space will allow for community programming for seniors and citizens in an inviting environment.	Guest post program surveys.
☑Enrich cultural experience	Increased space will provide the ability additional opportunities for free cultural programming to all ages, including music, art, writing, and educational events.	State library use statistics.
□Improve agricultural production/promotion/education		
☑Improve quality of education	Permanent classroom set-ups will allow for ESOL, technology, and other training for the public.	State library use statistics.
□Enhance/preserve/improve environmental or fish and wildlife quality		
□Protect the general public from harm (environmental, criminal, etc.)		
□Improve transportation conditions		
☑Increase or improve economic activity	Partnerships with SHINE, the Chamber of Commerce and other entities will allow for training and meetings for local businesses and additional space to meet for business meetings.	Tracking and reporting of number of outside business meetings held.
☑Increase tourism	Increased space for cultural opportunities attract guests from outside the county.	Guest post program surveys include attendee's hometown.

□Create specific immediate job opportunities		
☑Enhance specific individual's economic self sufficiency	Technology classes provide job skills. Resume classes allow for personal job growth.	Track student progress.
□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		
□Other (Please describe):		

19. Provide the total cost of the project for FY 2020-21 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:	2,000,000	60.6%	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:	1,300,000	39.4%	Yes

5. Other:	0	0.0%	No
TOTAL	3,300,000	100%	

20. Is this a multi-year project requiring funding from the state for more than one year? $\underline{\text{No}}$