

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Trout Lake Nature Center New Education Center
2. Date of Submission: 11/14/2019
3. House Member Sponsor: Jennifer Sullivan
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 <i>(If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2020-21 <i>(Requests for additional RECURRING funds are prohibited.)</i>		
Column:	A	B	C	D	E	F
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>	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:					1,500,000	1,500,000

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 Economic Opportunity
 - 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.
Penalties as stipulated per contract

6. Requester:

- a. Name: Eileen Tramontana
- b. Organization: Trout Lake Nature Center
- c. Email: tlnc.director@gmail.com
- d. Phone #: (352)357-7536

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

- a. Name: Eileen Tramontana
- b. Organization: Trout Lake Nature Center
- c. Email: tlnc.director@gmail.com
- d. Phone #: (352)357-7536

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: Trout Lake Nature Center Inc.
- b. County (County where funds are to be expended): Lake
- c. Service Area (Counties being served by the service(s) provided with funding): Citrus, Lake, Marion, Orange, Seminole

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?

Provide nature-based education for the region, visitors and students. To expand programs and increase our audience we need to build additional classrooms (both indoors and outdoors), replace aging natural history museum trailer, improve road and parking system, provide outdoor ADA accessible restrooms and add smaller community meeting space. Construction would also allow for a nature play area for smaller children and provide space to offer overlapping 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:		
<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 checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Furniture and exhibit design	250,000
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering	Building construction and permitting	1,250,000
TOTAL		1,500,000

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?

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:

To date, approximately \$1,000,000 has been raised from the community. Both the Board of County Commissioners of Lake County and the City of Eustis' Commission issued letters of support and continue to support this project as well as the Oklawaha Valley Audubon Society and Beautyberry Chapter of the Fl. Native Plant Society

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?

Yes

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

Construct indoor and outdoor teaching areas, new natural history museum to replace aging museum double-wide, outdoor accessible restrooms, small community meeting space and additional exhibit and education storage with administrative offices. It would include relocating maintenance work area and developing low-impact parking area

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

Being the ONLY nature center in Lake County and having reached maximum capacity, the Center will be able to expand its education programs and events, and add new programs for the community, families and youth. Expansion of community programs will be possible. This will include concurrent programs, business retreats and professional development training. Funding will allow the Center to begin additional eco-therapy and nature health programs. Replacing our aging double-wide museum with an updated

17c. Describe the target population to be served (i.e., "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
- Jobless persons
- 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): TLNC works with all groups and is especially focusing efforts to connect with disable/challenged gr

17d. How many in the target population are expected to be served?

- < 25
- 25-50
- 51-100
- 101-200
- 201-400
- 401-800
- >800

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 checked="" type="checkbox"/> Improve physical health	Research shows getting out and connecting with nature improves both physical and mental health Increase trail use by 10% Increase nature/health participants by 10%	Count of trail walkers Count of participants
<input type="checkbox"/> Improve mental health		
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	Provide school field experiences and in-school programs Provide nature-based education to the community and families	Number of classes/students participating Number of programs and participants in programs.
<input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality	Conduct habitat improvements on 230 acre property Conduct invasive species removals	By annual surveys, observations and some bio-blitzes
<input type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)		
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	Attracting more visitors will help to boost economic spending in the area.	Count from visitor register
<input checked="" type="checkbox"/> Increase tourism	TLNC is attracting visitors from throughout Florida, the United States and out of country. Improve out of county attendance by 5% currently 32% of visitors are from out of state	Zip codes provided on visitor register
<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 checked="" type="checkbox"/> Other (Please describe): Provide nature-based education and improve natural resources	PreK through fifth grade field experiences are provided to students. Community and family programming is also provided.	Conduct teacher evaluations, track student and field trip numbers, conduct random evaluations of community or adult programs offered, track participants numbers

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?
1. Amount Requested from the State in this Appropriations Project Request:	1,500,000	50.0%	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:	1,500,000	50.0%	Yes

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

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

No