Appropriations Project Request - Fiscal Year 2022-23

For projects meeting the definition of House Rule 5.14

1. Title of Project: Multi-user Space Launch Infrastructure

2. Date of Submission: 11/17/2021

3. House Member Sponsor: Rene Plasencia

4. Details of Amount Requested:

a. Has funding been provided in a previous state budget for this activity? <u>No</u>

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:	(If appropriated	ear Appropriation for FY 2021-22 in 2021-22 enter the count, even if vetoe	he appropriated	(Requests	Develop New Funds Rec for FY 2022-23 for additional RECURRING fu	
Column:	Α	В	С	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated	Recurring Base Budget	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds
Input Amounts:					10,000,000	10,000,000

e. Provide the total cost of the project for FY 2022-23 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	10,000,000	40.0%	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	0	0.0%	No

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5. Other	15,000,000	60.0%	Yes
TOTAL	25,000,000	100%	

5. Is this a multi-year project requiring funding from the state for more than one year? No

- 6. Which is the most appropriate state agency to place an appropriation for the issue requested? Department of Economic Opportunity
 - a. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? No
 - b. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

Appropriations project funds awarded shall be managed and released by DEO to Rocket Lab USA as reimbursements of site developement capital invested by the company. Rocket Lab will forfeit funds awarded in the event that development of the launch site has not commenced by December 31, 2023

- 7. Requester:
 - a. Name: Lars Hoffman
 - b. Organization: <u>Rocket Lab USA, Inc.</u>c. Email: l.hoffman@rocklabusa.com
 - d. Phone #: (714)655-2936
- 8. Contact for questions about specific technical or financial details about the project.
 - a. Name: Lars Hoffman
 - b. Organization: <u>Rocket Lab USA, Inc.</u>c. Email: l.hoffman@rocklabusa.com
 - d. Phone #: (714)655-2936
- 9. Registered lobbyist working to secure funding for this project.
 - a. Name: None
 - b. Firm: None
 - c. Email:
 - d. Phone #:
- 10. Organization or Name of entity receiving funds:
 - a. Name: Rocket Lab USA, Inc.

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 County (County wh 	ere funds are to be	expended): Brevard
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O Other (Please describe)

c. Service Area (Counties being served by the service(s) provided with funding): Brevard

11. What type of organization is the entity that will receive th	e funds?
• For Profit	
O Non Profit 501(c) (3)	
O Non Profit 501(c) (4)	
O Local Government	
O University or College	

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

The purpose of appropriations project funds awarded is to enable preconstruction planning, architecture, design engineering and construction of multiuser commercial space launch facilities that support United States Space Force and all DoD space launch requirements. Robust commercial capability is in the best interest of our national security and the state of Florida.

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

Spending Category	Description	Amount Requested (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		

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	□g. Consultants/Contracted Services/Study
	Fixed Capital Construction/Major Renovation:
Appropriated funds may be spent	☑h. Construction/Renovation/Land/Planning Engineering
on site study and evaluation,	
permitting, architecture,	
engineering and construction to	
modify existing infrastructure or	
to design and construct green	
field projects as necessary.	
	TOTAL
e facility be under when complete?	or Fixed Capital Costs requested in Question 13, what type of ownershi
	on site study and evaluation, permitting, architecture, engineering and construction to modify existing infrastructure or to design and construct green field projects as necessary.

14. For Fixed Capital Costs requested in Question 13, what type of ownership will the facility be under when comp	v be under when complete?	hip will the facility	what type of ownership	uested in Question 13	4. For Fixed Capital Costs re
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•For 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)

15. Is the project request an information technology project?

☐f. Expenses/Equipment/Travel/Supplies/Other

No

16. 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?

No

17. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

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18. Will the requested funds be used directly for services to citizens? $\underline{\text{No}}$

19. 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 or outcome
☐Improve physical health		
□Improve mental health		
□Enrich cultural experience		
☐Improve agricultural production/promotion/education		
☐Improve quality of education		
☐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	This multiuser launch facility at CCSFS will attract medium sized launch vehicles in support of the multibillion dollar commercial and DoD satellite industry. More importantly, these appropriated funds give Florida a competitive edge recruiting the most highly	Increased launch activity by a medium class space launch company.

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	sought after companies in the industry.	
□Increase tourism		
☑Create specific immediate job opportunities	Kennedy Space Center currently has only two (2) launch providers. The market requires access for mid-weight class vehicles not currently serving the space market from Florida. A young workforce of rocket technology engineers that are not currently choosing Florida will relocate to the surrounding communities.	Rocket Lab USA site selection of Florida over other potential states. Rocket Lab USA payroll attributable to Florida launch operations. Contractor and subcontractor support payrolls attributable to Florida multiuser launch site construction at CCSFS.
☐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		

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□Other (Please describe):	