#### **Appropriations Project Request - Fiscal Year 2022-23**

For projects meeting the definition of House Rule 5.14

1. Title of Project: Walton County Morrison Springs Recreational Improvements

2. Date of Submission: <u>11/02/2021</u>3. House Member Sponsor: <u>Brad Drake</u>

#### 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:	Input Prior Year Appropriation for this project for FY 2021-22 (If appropriated in 2021-22 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2022-23 (Requests for additional RECURRING funds are prohibited.)		
Column:	А	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:					1,000,000	1,000,000

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	1,000,000	100.0%	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	0	0.0%	No
TOTAL	1,000,000	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 Environmental Protection
  - 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.

If Walton County fails to meet the deliverables to this appropriation all funds will be returned to the State.

- 7. Requester:
  - a. Name: Trey Nick
  - b. Organization: Walton County Board of County Commissioners
  - c. Email: nictrey@co.walton.fl.us
  - d. Phone #: (850)892-8155
- 8. Contact for questions about specific technical or financial details about the project.
  - a. Name: Melinda Gates
  - b. Organization: Walton County Board of County Commissioners
  - c. Email: gatmelinda@co.walton.fl.us
  - d. Phone #: <u>(850)892-8108</u>
- 9. Registered lobbyist working to secure funding for this project.
  - a. Name: Kelly W. Horton
  - b. Firm: Heffley & Associates
  - c. Email: kelly@heffleyassociates.com
  - d. Phone #: (850)513-1200
- 10. Organization or Name of entity receiving funds:
  - a. Name: Walton County Board of County Commissioners

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<ul> <li>b. County (County where funds are to be expended): Wal</li> </ul>	Iton
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c. Service Area (Counties being served by the service(s) provided with funding): Walton

1. What type of organization is the entity that will receive the funds?	
O For Profit	
O Non Profit 501(c) (3)	
O Non Profit 501(c) (4)	
<ul><li>● Local Government</li></ul>	
O University or College	

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

<u>Provide additional waterfront park recreational facilities and eliminate user conflicts at Morrison Springs Park.</u>

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

O Other (Please describe)

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

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☐g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
☑h. Construction/Renovation/Land/Planning Engineering	Construction of a new canoe/kayak launch facility and boating improvements at the current boat landing at Morrison Springs.	1,000,000
TOTAL		1,000,000

14.	For Fixed Capital Costs requested in Question 13, what type of ownership will the facility be under when complete?
	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)

15. Is the project request an information technology project?

<u>No</u>

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?

  No
- 18. Will the requested funds be used directly for services to citizens?

<u>Yes</u>

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<ul> <li>a. What are the activities and services that will be provided to meet the purpose of the funds?</li> <li>Construction of a new canoe/kayak launch facility and boating improvements at the current boat landing at Morrison Springs.</li> </ul>
<ul> <li>Describe the direct services to be provided to the citizens by the funding requested.</li> <li>Construction of new recreational facilities at an existing waterfront park.</li> </ul>
c. 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): nefit all citizens and visitors of Walton County.
d. How many in the target population are expected to be served?
O< 25
O25-50
O51-100

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O201-400

O401-800

⊙>800

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	Construction of waterfront recreational facility.	Number of available recreational facilities.
☑Improve mental health	Passive recreation.	Number of available recreational facilities.
□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.)	The proposed project will help separate motorized and non-motorized vessels and decrease user conflict.	Number of available recreational facilities.
☐ Improve transportation conditions		
□Increase or improve economic activity		
☑Increase tourism	Project will provide additional	Number of recreational facilities.

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	recreational opportunities for	
	both the citizens and visitors.	
☐Create specific immediate job opportunities		
Defeate specific infinediate 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		
□Other (Please describe):		