

# Appropriations Project Request - Fiscal Year 2018-19

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: Tampa Bay Center for Innovation
2. Date of Submission: 11/14/2017
3. House Member Sponsor: Ben Diamond  
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? 2017-18
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? Yes
- d. Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2017-18 <i>(If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2018-19 <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>	<b>Additional Nonrecurring Request</b>	<b>TOTAL Nonrecurring plus Recurring Base Funds</b>  <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:		1,000,000	1,000,000		6,000,000	6,000,000

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 Economic Opportunity
  - 5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? Yes
  - 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.  
Return of funds

6. Requester:

- a. Name: Michael Meidel
- b. Organization: Pinellas County Economic Development
- c. Email: mmeidel@pinellascounty.org
- d. Phone #: (727)464-8114

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

- a. Name: Michael Meidel
- b. Organization: Pinellas County Economic Development
- c. Email: mmeidel@pinellascounty.org
- d. Phone #: (727)464-8114

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: Martha Edenfield
- b. Firm: Dean Mead
- c. Email: MEdenfield@deanmead.com
- d. Phone #: (850)999-4100

9. Organization or Name of entity receiving funds:

- a. Name: Pinellas County
- b. County (County where funds are to be expended): Pinellas
- c. Service Area (Counties being served by the service(s) provided with funding): Hernando, Hillsborough, Manatee, Pasco, Pinellas, Polk, Sarasota

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?

The project would lead to the formation of new high-wage primary employers throughout the Tampa Bay area and the creation of quality jobs for citizens of Florida. Funds would be matched against local and federal dollars to construct and equip a 40,000 to 50,000 square foot state-of-the-art business incubator facility.

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 type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
<input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering	Design and construction of a new 40-50,000 square foot, purpose-built, state-of-the-art business incubator facility	6,000,000
<b>TOTAL</b>		<b>6,000,000</b>

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:

Pinellas County Approved 2017 Legislative Agenda; St. Petersburg Chamber of Commerce Draft 2017 Legislative Agenda; Supported by St. Petersburg Innovation District and St. Petersburg Downtown Partnership; Land for project provided by City of St. Petersburg; Letters of support from UCF, Moffitt, Florida Venture Forum, Florida Defense Contractors Association, Tampa Bay Technology Forum in May 2016.

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:

"FEASIBILITY ANALYSIS OF A BUSINESS INCUBATOR IN THE ST. PETERSBURG AREA" by Greenwood Consulting Group, Inc. was delivered on October 29, 2013. The report was requested by the Tampa Bay Innovation Center. The study concluded that a mixed-use business incubator is feasible. The area ranked average or better in all six feasibility factors examined: market, business assistance, champion, real estate, development cost and funding, and operating sustainability.

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?

N/A

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

Small business owners and entrepreneurs will receive direct services. Some of these will be unemployed individuals. Tenants may hire individuals from adjacent economically disadvantaged area. Nearby USF students will conduct market studies and serve as interns. Over the life of the facility, many hundreds of individuals will benefit.

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)

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	Life Sciences and medical devices will be among the target industries. The development of new devices and/or drugs or therapies would be a possible measure.	Number of patents. Number of clinical trials.
<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	The incubator operator will work closely with USFSP to provide internship and apprenticeship opportunities at start-ups, along with opportunities for class projects and university research.	Number of student interns. Number of university research projects.
<input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality	St. Petersburg is a center for marine science research and this will be another target for the facility. Outcomes could include new marine sensors or new discoveries on enhancing fish populations.	Patents issued. Scientific studies published.
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Information Technology will be another target sector. This would include development of new cyber-security systems and software	New products developed. Sales figures.

<input checked="" type="checkbox"/> Improve transportation conditions	Development of new devices and software to assist in transportation management, vehicle safety, autonomous vehicles and similar technologies	Patent activity. Product Launches. Sales figures.
<input checked="" type="checkbox"/> Increase or improve economic activity	Increased business formation, sales, payroll and capital investment	Number of business formations, number of graduates, debt and equity investment amounts, sales achieved, payroll amounts
<input checked="" type="checkbox"/> Increase tourism	Visitors from around the world will visit the center to see the facility and the operations.	Number of room nights generated.
<input checked="" type="checkbox"/> Create specific immediate job opportunities	Creation of new high wage jobs	Jobs created. Jobs retained. Number of interns. Average wages.
<input checked="" type="checkbox"/> Enhance specific individual's economic self sufficiency	Employ individuals that were previously unemployed or underemployed.	Track number of new hires or business startups by previous employment category.
<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 type="checkbox"/> 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?
1. Amount Requested from the State in this Appropriations Project Request:	6,000,000	46.5%	N/A
2. Federal:	2,000,000	15.5%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	4,000,000	31.0%	No
5. Other:	900,000	7.0%	Yes
<b>TOTAL</b>	<b>12,900,000</b>	<b>100%</b>	

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

No