

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Manatee County Water Quality Improvement with Native Oysters and Clams
2. Date of Submission: 10/14/2019
3. House Member Sponsor: Will Robinson
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:					950,000	950,000

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 Environmental Protection
 - 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.

Withholding of funding

6. Requester:

- a. Name: Charlie Hunsicker
- b. Organization: Manatee County Government
- c. Email: charlie.hunsicker@mymanatee.org
- d. Phone #: (941)745-3727

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

- a. Name: Charlie Hunsicker
- b. Organization: Manatee County Government
- c. Email: charlie.hunsicker@mymanatee.org
- d. Phone #: (941)745-3727

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

- a. Name: Cari Roth
- b. Firm: Dean Mead
- c. Email: croth@deanmead.com
- d. Phone #: (850)999-4100

9. Organization or Name of entity receiving funds:

- a. Name: Manatee County Government
- b. County (County where funds are to be expended): Manatee
- c. Service Area (Counties being served by the service(s) provided with funding): Statewide

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?

Working with project partners from the University of Florida Sea Grant program, the Gulf Shellfish Institute and nonprofits: Sarasota Baywatch and Solutions to Avoid Red Tide (START) 1) to provide necessary supplemental funding for Manatee County’s direct component and state expenditure plan RESTORE Act grants; 2) to pilot the placement of live clams and oyster shell habitat in the Manatee river, Sarasota Bay and Tampa Bay estuaries; 3) support peer reviewed, open source research.

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	Manatee County Department of Parks and Natural Resources: Design Planning: 100,000 Final Design/Permitting:200,000 Construction 320,000 Marine Services: 10,000 Gulf Shellfish	950,000

	Institute: \$230,000 Sarasota Bay Watch: \$ 70,000 START \$ 20,000	
TOTAL		950,000

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?

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:

This project provides the building blocks for our RESTORE Act and has gone through a 45 day public comment period in May 2017, Board of County Commissioners approval (6/20/17) and the Gulf Coast Restoration Council through approval of the State Expenditure Plan (1/5/2018). The Multi Year Implementation Plan has been approved by our Board of County Commissioners during same time frame.

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:

Barber, B. 2019. Facilitation of seagrass productivity in Tampa Bay using the indigenous, suspension feeding bivalve, *Mercenaria campechiensis*. Tampa Bay Estuary Program Technical Report #04-19 TBEP, St. Petersburg, FL.

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

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 type="checkbox"/> Improve physical health		
<input type="checkbox"/> Improve mental health		
<input type="checkbox"/> Enrich cultural experience		
<input checked="" type="checkbox"/> Improve agricultural production/promotion/education	Increase sales of bivalves Increase planting of "seeds"	Record of sales receipts for bivalves and seeds
<input checked="" type="checkbox"/> Improve quality of education	Educational materials printed and electronic (hosting workshops, brochures, social media)	Online survey pre and post assessment
<input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality	Water quality Water clarity Sea grass coverage	Testing with use of sensors and monitors throughout project duration Document number of sea grass acres before, during and after
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Reduction of shoreline erosion Reduced surge height Storm surge wave attention	Presence/absence growing oysters Long term monitoring of oyster habitat along shorelines of Manatee County.
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	Improve economic activity for growers	Use IFAS modeling software to measure
<input checked="" type="checkbox"/> Increase tourism	Increase catch success for sport fishing	Track number of recreational anglers coming to area

<input checked="" type="checkbox"/> Create specific immediate job opportunities	Hiring contract labor to deploy materials	Invoices for contractors
<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 checked="" type="checkbox"/> Improve surface water quality	Water quality improvement through reduction of water column nutrients (i.e. nitrogen, phosphorus)	Water quality sensors will be utilized throughout study area over restoration sites measured against control locations
<input type="checkbox"/> 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?
1. Amount Requested from the State in this Appropriations Project Request:	950,000	18.8%	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
5. Other:	4,100,000	81.2%	Yes
TOTAL	5,050,000	100%	

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

No

21. What is the revenue source of ongoing operating funds?

Local government, ad valorem

22. Has local approval been given for ongoing operating funds?

Yes

23. Have you applied for alternative state funding?

a. Wastewater Revolving Loan

b. Drinking Water Revolving Loan

c. Small Community Wastewater Treatment Grant

d. Other (Please describe): Approved in RESTORE Act Gulf Consortium State Expenditure Plan for \$4,100,000.

e. N/A

24. Has project been addressed in a local, regional, or state plan?

Yes

24a. If Yes, insert plan name and cite page numbers.

Gulf Consortium State Expenditure Plan page 371-377. Rice, M.A. (2001) Environmental Impacts of Shellfish Aquaculture: Filter Feeding to Control Eutrophication. pp. 77-86. In: M. Tlusty, D. Bengtson, H.O. Halvorson, S.Oktay, J. Pearce & R. Rheault, (eds.). Marine Aquaculture and the Marine Environment: A Meeting for the Stakeholders in the Northeast. Held Jan. 11-13, 2001 at the Univ. of Massachusetts Boston. Cape Cod Press, Falmouth MA. Grabowski, J.H. et al. (2012) Bioscience 62:900-909

25. Is the project for a financially disadvantaged community? (as defined in Chapter 62-552, F.A.C.)

No

26. What is the population economic status?

a. Financially Disadvantaged Municipality

- b. Rural Area of Critical Economic Concern
- c. Rural Community Experiencing Economic Distress
- d. N/A

27. What is the status of planning?

- a. Ready
- b. Not Ready

28. What percentage of the planning process has been completed?

20%

29. What is the estimated planning completion date?

10/31/2020

30. What is the status of design?

- a. Ready
- b. Not Ready

31. What percentage of design has been completed?

0%

32. What is the estimated design completion date?

01/31/2021

33. List all required permits.

Federal authorization will be accomplished through a Nationwide or Individual Permit issued by the United States Army Corps of Engineers likely with Section 7 consultation through the National Marine Fisheries Service and US Fish and Wildlife Service and any navigational issues approved by the US Coast Guard. State Authorization will be accomplished with issuance of an Environmental Resource Permit and Sovereign Submerged Land approval by the FL DEP.

34. What is the status of permitting?

- a. Planned
- b. Submitted
- c. Received

35. What is the status of construction?

a. Ready

b. Not Ready

36. What percentage of construction has been completed?

0%

37. What is the estimated completion date of construction?

06/30/2021