

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Florida Tech - Restore Lagoon Inflow Research Project

2. Date of Submission: 10/23/2019

3. House Member Sponsor: Thad Altman

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? 2019-20
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- 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: | | 800,000 | 800,000 | | 912,500 | 912,500 |

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 Education

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.

Standard contract conditions

6. Requester:

- a. Name: Robert Salonen
- b. Organization: Florida Institute of Technology
- c. Email: rsalonen@fit.edu
- d. Phone #: (321)501-1900

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

- a. Name: Robert Salonen
- b. Organization: Florida Institute of Technology
- c. Email: rsalonen@fit.edu
- d. Phone #: (321)501-1900

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

- a. Name: Scott Ross
- b. Firm: Capital City Consulting
- c. Email: Scott@CCCFLA.com
- d. Phone #: (850)222-9075

9. Organization or Name of entity receiving funds:

- a. Name: Florida Institute of Technology
- b. County (County where funds are to be expended): Brevard
- c. Service Area (Counties being served by the service(s) provided with funding): Brevard, Indian River

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 Florida Tech Indian River Lagoon Research Institute will continue work on solutions for improving water quality in the Indian River Lagoon (IRL) with the second phase of a multi-phase pilot project to investigate the impacts of restoring periodic historical ocean inflows to the IRL. The second phase will support comparative studies and selection of a test site, design of a temporary test inflow system with associated permitting, and preliminary design of a site compatible inflow system.

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 | Analysis tools, Watercraft utilization, travel and expenses associated with accessing and implementing lagoon and coastal study sites | 319,375 |
| <input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study | Planning and performing of studies; monitoring and modeling of study sites; planning and permitting temporary site | 593,125 |
| Fixed Capital Construction/Major Renovation: | | |

| | | |
|---|--|---------|
| <input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering | | |
| TOTAL | | 912,500 |

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:

The rationale for the requested water circulation pilot project is cited by St. Johns Water Management District as an area of interest - <https://www.sjrwmd.com/renew-lagoon/#faq-11> . Restoring the Indian River Lagoon is an environmental and economic public priority for governments, industry, community organizations and the chambers of commerce as demonstrated by 2019 Letters of Support.

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:

The rationale for the requested water circulation pilot project is cited by St. Johns Water Management District as an area of interest - <https://www.sjrwmd.com/renew-lagoon/#faq-11> . The Florida Department of Education has authorized the 2019 initial phase of the project.

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

No

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 type="checkbox"/> Improve agricultural production/promotion/education | | |
| <input type="checkbox"/> Improve quality of education | | |
| <input checked="" type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality | Phase II of the multi-phase project will finalize comparative environmental Phase 1 data, and support the selection of a test site with associated permitting for placement of inflow test structure. (Phase III) | Evaluate the feasibility and desirability of restoring measured historic tidal inflows into the IRL. Selection and permitting application of a test site. Preliminary design of feasible site compatible structure. |
| <input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.) | Phase II of the multi-phase project will finalize comparative environmental Phase 1 data, and support the selection of a test site with associated permitting for placement of inflow test structure. (Phase III) | Evaluate the feasibility and desirability of restoring measured historic tidal inflows into the IRL. Selection and permitting application of a test site. Preliminary design of feasible site compatible structure. |
| <input type="checkbox"/> Improve transportation conditions | | |
| <input checked="" type="checkbox"/> Increase or improve economic activity | Improvement of the quantity and quality of actionable data in the IRL potentially leading to partial relief of negative impacts on property values, | Securing and assessing data as a baseline measurement of existing ecosystems at study location as a platform for documenting potential |

| | | |
|--|---|---|
| | tourism, and recreation along IRL | future improvement |
| <input type="checkbox"/> Increase tourism | | |
| <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 checked="" type="checkbox"/> Improve surface water quality | Phase II of the multi-phase project will finalize comparative environmental Phase 1 data, and support the selection of a test site with associated permitting for placement of inflow test structure. (Phase III) | Evaluate the feasibility and desirability of restoring measured historic tidal inflows into the IRL. Selection and permitting application of a test site. Preliminary design of feasible site compatible structure. |
| <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 | 912,500 | 100.0% | N/A |

| | | | |
|---|----------------|-------------|----|
| Project Request: | | | |
| 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: | 0 | 0.0% | No |
| TOTAL | 912,500 | 100% | |

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

Yes

20a. How much state funding would be requested after 2020-21 over the next 5 years?

- <1M
- 1-3M
- >3-10M
- >10M

20b. How many additional years of state support do you expect to need for this project?

- 1 year
- 2 years
- 3 years
- 4 years
- >= 5 years

20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select "ongoing activity".

- Ongoing activity – no total cost
- <1M
- 1-3M
- >3-10M
- >10M