

Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Wakulla County Wakulla Gardens and Magnolia Gardens Septic to Sewer Phase 3
2. Date of Submission: 11/14/2017
3. House Member Sponsor: Halsey Beshears
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 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>	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:					4,200,000	4,200,000

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 Environmental Protection
 - 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.

Agreement with Water Management District would be structured as cost reimbursement, only approved/allowable expenditures would be reimbursed.

6. Requester:

- a. Name: Sheree Keeler
- b. Organization: Wakulla County Board of County Commissioners
- c. Email: skeeler@mywakulla.com
- d. Phone #: (850)926-0919

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

- a. Name: Sheree Keeler
- b. Organization: Wakulla County Board of County Commissioners
- c. Email: skeeler@mywakulla.com
- d. Phone #: (850)926-0919

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

- a. Name: None
- b. Firm: None
- c. Email:
- d. Phone #:

9. Organization or Name of entity receiving funds:

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

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?

Continue the removal of on-site septic systems, construction of central sewer and connections for properties located in historic Wakulla Gardens and Magnolia Gardens, both neighborhoods are located in the Wakulla Springs Basin/St. Marks-Wakulla River Watershed . Goal is to reduce non-point pollution due to aging septic systems, runoff from septic systems that overflow during moderate to heavy rains and possible cross contamination for properties on wells for potable water usage.

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, engineering, permitting, construction, connections, construction oversight for phase 3	4,200,000
TOTAL		4,200,000

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?

N/A

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:

Several RESTORE Act public meetings have taken place (9/19, 21, and 25, 2017), at each meeting water quality and the need for septic-to-sewer projects were well received. There was around 30 attendees total all public meetings.

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:

Lombardi Study, Wakulla Springs B-MAP, SWIM Plans

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

N/A

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
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<input checked="" type="checkbox"/> Improve physical health	Number of on-site septic systems taken off line	Number of properties connected to central sewer.
<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 type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	Number of on-site septic systems taken off line	Number of properties connected to central sewer.
<input checked="" type="checkbox"/> Improve transportation conditions	Paving of dirt roads that flood during moderate to heavy rain that will reduce non-point pollution run off and provide easier access during 911 calls	Number of dirt roads paved. (County investment from 1 cents sales tax)
<input checked="" type="checkbox"/> Increase or improve economic activity	Provide infrastructure for new homes and businesses in the surrounding area.	Number of permits for new homes or businesses in the areas where central sewer was expanded.
<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 checked="" type="checkbox"/> Improve wastewater management	Number of on-site septic systems taken off line	Number of properties connected to central sewer.
<input checked="" type="checkbox"/> Improve stormwater management	Paving of dirt roads providing proper drainage of run off	Number of dirt roads paved.
<input checked="" type="checkbox"/> Improve groundwater quality	Number of on-site septic systems taken off line	Number of properties connected to central sewer.
<input type="checkbox"/> Improve drinking water quality		
<input checked="" type="checkbox"/> Improve surface water quality	Number of on-site septic systems taken off line and paving of dirt roads.	Number of properties connected to central sewer and number of dirt roads paved.
<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:	4,200,000	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
5. Other:	0	0.0%	No
TOTAL	4,200,000	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 2018-19 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

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

General Revenue, sewer fees and one cent sales tax

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)
- 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.

2017 adopted infrastructure plan, Wakulla Springs BMAP, Draft St. Marks-Wakulla River SWIM Plan

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?

0%

29. What is the estimated planning completion date?

5/01/19

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?

5/01/19

33. List all required permits.

State and local permits will be needed but the specific permits are unknown until funds are available and the planning and design completed.

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?

12/30/20