Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: Miami River Commission Economic Develpment

Senate Sponsor: Rene Garcia
 Date of Submission: <u>11/01/2017</u>

4. Project/Program Description:

Miami River Commission / Attracting job generating businesses and developments to the Miami River District.

5. State Agency Contacted? No

a. If yes, which state agency?

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Economic Opportunity

6. Amount of Non-recurring Requested for fiscal year 2018-19:

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
150,000	Tixed capital Outlay	150,000

Type, amount and percent of matching funds available for this project for fiscal year 2018-19:

Туре	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	109,800	39.2%
Other	20,000	7.1%
TOTAL	129,800	46.3 %

8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 279,800

9. Previous Year Funding Details:

- a. Has funding been provided in a previous state budget for this activity? Yes
- b. In the previous 5 fiscal years, how many years was funding provided? (Optional) 4
- c. What is the most recent fiscal year the project was funded? 2015-16
- d. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- e. Complete the following Worksheet.



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FY:	Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
Column:	Α	В	С
Funds Description: Input Amounts:	Prior Year Recurring Funds *	Prior Year Nonrecurring Funds *	Total Funds Appropriated (Column A + Column B)

10. Is future-year funding likely to be requested?

Yes

a. If yes, indicate non-recurring amount per year.

\$150,000 non-recurring per year

11. Program Performance:

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

Attract, support and assist job generating businesses to the Miami River District.

b. What are the activities and services that will be provided to meet the intended purpose of these funds?

<u>Directly assisting job generating businesses with applicable zoning codes, land use laws and approval processes.</u>

c. How will the funds be expended?

Spending Category	Description	Amount
Administrative Costs		
□Executive Director/Project Head Salary and Benefits		
□Other Salary and Benefits		
□Expense/Equipment/Travel/Supplies/Other		
□Consultants/Contracted Services/Study		
Operational Costs		
☑Salary and Benefits	Annual payroll, payroll taxes,	94,190



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	health and dental insurance for Miami River Commission operations described in #11	
☑Expense/Equipment/Travel/Supplies/Other	Travel, supplies, fees and insurance.	14,850
☑Consultants/Contracted Services/Study	Professional economic consultant to create a Miami River Economic Analysis, graphic design consultant, consultant for monthly website updates on miamirivercommission.org and professional independent accounting.	40,960
Fixed Capital Construction/Major Renovation		
□Construction/Renovation/Land/Planning Engineering		
TOTAL		150,000

d. What are the direct services to be provided to citizens by the appropriations project?

Attracting, supporting and assisting job generating businesses in the Miami River District.

- e. Who is the target population served by this project? How many individuals are expected to be served?
 - <u>200,000 South Florida and the Miami River District, which is one of the most densely populated areas in the State.</u>
- f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
 - Improve the economy, measured by the quantity of new job generating businesses and developments in the Miami River District.
- g. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?

 Previous and current State contracts were 100% reimbursable, therefore the state funding is only provided after satisfactorily meeting deliverables and performance measures.
- 12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.



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No funding requested for fixed capital outlay.

13. Requestor Contact Information:

a. Name: Brett Bibeau

b. Organization: Miami River Commission

c. Email: brettbibeau@miamirivercommission.org

d. Phone Number: (305)987-4446

14. Recipient Contact Information:

a. Organization: Miami River Commission

b. County: Miami-Dadec. Organization Type:

O For Profit

O Non Profit 501(c) (3)

O Non Profit 501(c) (4)

O Local Entity

O University or College

• Other (Please specify) Floirda Legislature created the Miami River Commission in F.S. 163.06

d. Contact Name: Brett Bibeau

e. E-mail Address: brettbibeau@miamirivercommission.org

f. Phone Number: (305)987-4446

15. If there is a registered lobbyist, fill out the lobbyist information below.

a. Name: Noneb. Firm: Nonec. Email:

d. Phone Number: