

Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: City of Fernandina Beach Stormwater Shoreline Stabilization

Senate Sponsor: Aaron Bean
 Date of Submission: <u>11/28/2017</u>

4. Project/Program Description:

Securing and Stabilizing the City's Waterfront Marina Seawall

- **5. State Agency Contacted?** Yes
 - a. If yes, which state agency? Department of Environmental Protection
 - b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?

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

Amo	ount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
		970,000	970,000

7. 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	970,000	50.0%
Other	0	0.0%
TOTAL	970,000	50.0 %

8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 1,940,000

9. Previous Year Funding Details:

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

	Input Prior FY Appropriation for this project
FY:	for FY 2017-18



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

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

Yes

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

Yes, 1-3 million over a period of 2-5 years

11. Program Performance:

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

Replacement of the Fernandina Harbor Marina seawall

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

Replacement of 270 lineal feet of the marina seawall, planning, permitting and site preparation

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		
□Expense/Equipment/Travel/Supplies/Other		



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☐Consultants/Contracted Services/Study Fixed Capital Construction/Major Renovation		
☑Construction/Renovation/Land/Planning Engineering	Design Engineering for complete project construction. This amount will be matched by the City for \$970,000 for replacing 270 feet of seawall which will be 4 feet taller than the existing/failed seawall.	970,000
TOTAL		970,000

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

Reduction of Downtown flooding, increased tourism, and protection from the impact of rising sea levels See attached Addendum "A" and Addendum "B" (Please email to request addendums)

e. Who is the target population served by this project? How many individuals are expected to be served?

City of Fernandina Beach Residents along with all visitors - 25,000 people

f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

The completion of the Front Street Phase Storm water Drainage Project by stabilizing and heightening the Fernandina Harbor Marina Seawall.

- 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?

 Failure to meet deliverables without notification of good reasoning will result in cancellation of the contract and forfeiture of remaining balance of unspent appropriation.
- 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.

City of Fernandina Beach

13. Requestor Contact Information:

a. Name: Dale Martin

b. Organization: City of Fernandina Beach

c. Email: dmartin@fbfl.org

d. Phone Number: (904)310-3100

14. Recipient Contact Information:



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	a. Organization: City of Fernandina Beach		
	b. County: Nassau		
	c. Organization Type: O For Profit		
	O Non Profit 501(c) (3)		
	O Non Profit 501(c) (4)		
	Local Entity		
	O University or College		
	O Other (Please specify)		
	d. Contact Name: Dale Martin		
	e. E-mail Address: dmartin@fbfl.org		
	f. Phone Number: (904)310-3100		
15.	If there is a registered lobbyist, fill out the lobbyist information below.		
	a. Name: Arthur Jacobs		
	b. Firm: Jacobs Scholz & Associates		
	c. Email: aijacobs@comcast.net		
	d. Phone Number: (904)261-3693		
16.	Have you applied for alternative state funding?		
	□Wastewater Revolving Loan		
	□Drinking Water Revolving Loan		
	☐Small Community Wastewater Treatment Grant		
	□Other (Please describe)		
	⊠N/A		
17.	What is the population economic status?		
	☐ Financially Disadvantaged Community (ch. 62-552, F.A.C)		
	☐ Financially Disadvantaged Municipality (ch. 62-552, F.A.C)		
	□Rural Area of Economic Concern		
	□Rural Area of Opportunity (s. 288-0656, Florida Statutes)		
	⊠N/A		
18.	What is the status of construction?		
	Planning Phase		



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19. What percentage of construction has been completed?

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20. What is the estimated completion date of construction?

September 30, 2019