

## The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 1937

1. Project Title	Fernandina Beach Protecting Barrier Island	the Re	esiliency of Florida's N	Northeastern		
2. Senate Sponsor	Clay Yarborough					
3. Date of Request	02/16/2023					
4. Project/Program Des	scription					
beach Walkovers at C protective beach dun- areas adjacent to the degraded dune areas Atlantic Ocean-side d new Walkovers are c	ch "Protecting the Resiliency of City Beach Access Points that respectively and also place same with the properties of significant environmental values against sea water encroaritically-needed to protect the dry's extreme population growth	now have defenced to the control of	ve Walkthroughs (i.e. s, pedestrian control dune accumulations drestore the protective trelated to hurricane om the inevitable inci	pedestrian walking lanes, sea oats, an . This project will he ve resiliency of the s and sea level rise reased use of Ferna	g trails which cut through d educational signage in elp restore and stabilize Fernandina Beach e. Construction of the	
5. State Agency to rece			ent of Environmental			
State Agency contact	-					
		004	22.224			
	ecurring Request for Fiscal Y	ear 202	23-2024		1	
Type of Funding			Amo	unt		
Operations				0		
Fixed Capital Outlay			500,000			
<b>Total State Funds R</b>	eauested			500,000		
				000,000	ı	
	•	udina r	matching funds ava	•		
7. Total Project Cost fo	or Fiscal Year 2023-2024 (incl	uding r		ilable for this proj		
7. Total Project Cost fo	or Fiscal Year 2023-2024 (incl	uding r	Amount	ilable for this proj		
7. Total Project Cost fo  Type of Funding  Total State Funds Re	•	uding r		ilable for this proj		
7. Total Project Cost fo  Type of Funding  Total State Funds Re  Matching Funds	or Fiscal Year 2023-2024 (incl	uding r	Amount 500,000	ilable for this proj Percentage 67%	ect)	
7. Total Project Cost for Type of Funding Total State Funds Re Matching Funds Federal	equested (from question #6)	uding r	Amount 500,000	ilable for this proj Percentage 67%	ect)	
7. Total Project Cost fo  Type of Funding  Total State Funds Re  Matching Funds  Federal  State (excluding the a	or Fiscal Year 2023-2024 (incl	uding r	Amount 500,000	Percentage 67% 0%	ect)	
7. Total Project Cost for  Type of Funding  Total State Funds Re  Matching Funds  Federal  State (excluding the a	equested (from question #6)	uding r	Amount 500,000 0 0 250,000	Percentage 67% 0% 0% 33%	ect)	
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7. Total Project Cost for Type of Funding Total State Funds Remark Matching Funds Federal State (excluding the allocal Other	equested (from question #6)	uding r	Amount 500,000 0 0 250,000	Percentage 67% 0% 0% 33%	ect)	
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7. Total Project Cost for Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs  8. Has this project pres	equested (from question #6) amount of this request)  for Fiscal Year 2023-2024 viously received state funding	g?	Amount 500,000  0 250,000 0 750,000	ilable for this proj Percentage 67% 0% 0% 33% 0% 100%	ect)	
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7. Total Project Cost for Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs  8. Has this project previous Fiscal Year (yyyy-yy)  9. Is future funding like a. If yes, indicate no	equested (from question #6)  amount of this request)  for Fiscal Year 2023-2024  viously received state fundin  Amount  Recurring Nonrecur  ely to be requested?  onrecurring amount per year.	g?	Amount 500,000  0 250,000 0 750,000 No Specific Appropriation #	Percentage 67% 0% 0% 33% 0% 100%	ect)	
7. Total Project Cost for Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a Local Other Total Project Costs  8. Has this project previous Fiscal Year (yyyy-yy)  9. Is future funding like a. If yes, indicate no	equested (from question #6)  amount of this request)  for Fiscal Year 2023-2024  viously received state fundin  Amount  Recurring Nonrecur  ely to be requested?	g?	Amount 500,000  0 250,000 0 750,000 No Specific Appropriation #	Percentage 67% 0% 0% 33% 0% 100%	ect)	



Yes

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10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

If yes, indicate the amount of funds received and what the funds were used for.

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500,000

soriono, ao anovoa sy ario ranono	o City police and fire department first responders' salaries and an Rescue Plan Act Agreement Final Rule stipulations.	
Complete questions 11 a	nd 12 for Fixed Capital Outlay Projects	
11. Status of Construction		
a. What is the current phase of the	ne project?	
○Planning	Construction	
b. Is the project "shovel ready" (	i.e permitted)?	
c. What is the estimated start da	te of construction? January 1, 2024	
d. What is the estimated comple	tion date of construction? June 1, 2024	
All fixed capital outlay funding wi	Il be for construction on property fully-owned by the City of Fernandina E	
13. Details on how the requested st Spending Category	ate funds will be expended  Description	
A desiminate of the Control		Amount
Administrative Costs:		Amount
Executive Director/Project Head Salary and Benefits		Amount
Executive Director/Project Head		Amount
Executive Director/Project Head Salary and Benefits		Amount
Executive Director/Project Head Salary and Benefits Other Salary and Benefits Expense/Equipment/Travel/Supplies/		Amount
Executive Director/Project Head Salary and Benefits Other Salary and Benefits Expense/Equipment/Travel/Supplies/Other Consultants/Contracted Services/Study Operational Costs: Other		Amount
Executive Director/Project Head Salary and Benefits Other Salary and Benefits Expense/Equipment/Travel/Supplies/Other Consultants/Contracted Services/Study  Operational Costs: Other Salary and Benefits		Amount
Executive Director/Project Head Salary and Benefits Other Salary and Benefits Expense/Equipment/Travel/Supplies/Other Consultants/Contracted Services/Study Operational Costs: Other		Amount
Executive Director/Project Head Salary and Benefits Other Salary and Benefits Expense/Equipment/Travel/Supplies/Other Consultants/Contracted Services/Study  Operational Costs: Other Salary and Benefits Expense/Equipment/Travel/Supplies/		Amount
Executive Director/Project Head Salary and Benefits Other Salary and Benefits Expense/Equipment/Travel/Supplies/Other Consultants/Contracted Services/Study  Operational Costs: Other Salary and Benefits Expense/Equipment/Travel/Supplies/Other Consultants/Contracted	r Renovation:	Amount

Total State Funds Requested (must equal total from question #6)

14. Program Performance



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

Purpose: To construct new beach walkovers to increase dune protection and dune growth, which in turn protects lives and property. More specifically, to prepare for increased flooding due to sea level rise on Amelia Island along Florida's Northern-most Atlantic Ocean beaches by providing elevated beach access structures to reduce walking trails being cut through dunes, a need exacerbated by a remarkable population growth in Nassau County and increased tourism on Amelia Island.

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

Construction of a beach walkovers, dune fencing, and sea oats plantings will be completed through this Appropriation.

c. What direct services will be provided to citizens by the appropriation project?

Construct beach walkovers which are an amenity that allows protective beach dunes to accumulate and which also provides residents and tourists with an easy means to transport beach paraphernalia such as coolers and umbrellas to the beach, without damaging the dunes. Additionally, the creation and protection of beach dunes that beach walkovers help create and maintain habitat and nesting ground for protected and threatened wildlife including turtles and migratory nesting birds.

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

The creation and protection of beach dunes that beach walkovers help create and maintain helps protect the lives and property of Fernandina Beach's 13,199 residents and attracts hundreds of thousands of visitors to Amelia Island. In 2021, over 513,000, or 77.4%, of Amelia Island's 662,900 overnight visitors ranked Fernandina Beach Historic District and beaches as one of their "Top Activities Enjoyed."

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

The outcome of the "Protecting the Resiliency of Florida's Northeastern Barrier Island" will be the design, permitting and construction of three new Beach Walkovers at Beach Access points most at risk of Atlantic Ocean flooding. Methodology to ensure this outcome will be that the work will be completed under the supervision of the City of Fernandina Beach Civil Engineer and verified through Engineering certificates of completion.

f. 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 the contract?

Failure to fully-satisfy each deliverable of the "Protecting the Resiliency of Florida's Northeastern Barrier Island" project would make Fernandina Beach ineligible for reimbursement from the State of Florida.

15. Requester Contact	t Informat	ion			
a. First Name	Bradley		Last Name	Bean	
b. Organization	Mayor, C	ity of Fernandina	Beach		
c. E-mail Address	bbean@f	bfl.org			
d. Phone Number	(904)415	-5181	Ext.		
16. Recipient Contact	Information	on			
a. Organization	City of Fe	ernandina Beach			
b. Municipality and	d County	Nassau			
c. Organization Ty	ре				
□For Profit Entity					



17.

# The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

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□Non Profit 501(c	2)(3)					
□Non Profit 501(c	<del>(</del> )(4)					
☑Local Entity						
□University or Co	□University or College					
□Other (please sp	□Other (please specify)					
d. First Name	Lorelei	Last Name	Jacobs			
e. E-mail Address	ljacobs@fbfl.org					
f. Phone Number	(904)310-3104					
Lobbyist Contact Information						
a. Name	Arthur I. Jacobs					
b. Firm Name	Jacobs & Associates PA					
c. E-mail Address	aijacobs@comcast.net					
d. Phone Number	(904)261-3693					