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The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. Title of Project: Kings Bay Restoration Project Phase 1

Senate Sponsor: Wilton Simpson
 Date of Submission: 12/11/2017

4. Project/Program Description:

A project to hydraulically vacuum remove, replant, and restore habitat in approximately 4.5 canals (Phase 1 map canals 3,5,6,7 and remaining canal 2) for a total of 10.52 acres of waterways adjacent to Three Sisters Spring. It includes removing invasive algae and decayed organic detrital material from the natural substrate and replant the canals with native eel grass to be monitored and maintained for one to two years after planting

5. State Agency Contacted? Yes

- a. If yes, which state agency? <u>Department of Environmental Protection</u>
- 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:

| Amount Requested for Operations | Amount Requested for Fixed Capital Outlay | Total Amount of Requested State Funds | |
|---------------------------------|--|--|--|
| 3,000,000 | | 3,000,000 | |

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

| Туре | Amount | Percent |
|--|---------|---------|
| Federal | 344,000 | 9.1% |
| State (excluding the amount of this request) | 0 | 0.0% |
| Local | 444,000 | 11.7% |
| Other | 0 | 0.0% |
| TOTAL | 788,000 | 20.8 % |

8. Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds): 3,788,000

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) 3
- c. What is the most recent fiscal year the project was funded? 2017-18
- 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: | A B C | | | | |
| Funds Description: | Prior Year Recurring Funds * | Prior Year Nonrecurring Funds * | Total Funds Appropriated (Column A + Column B) | | |
| Input Amounts: | | 2,000,000 | 2,000,000 | | |

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

Yes

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

\$40 Million to be disbursed over a four to five year period as work is completed

11. Program Performance:

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

Restoration of critical spring shed habitat and an Outstanding Florida Waterway

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

Removal of algal detrital material, plant SAV, monitor and maintain SAV

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 | | |



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| □Expense/Equipment/Travel/Supplies/Other | | |
|--|--|-----------|
| ☑Consultants/Contracted Services/Study | Detrital material removal, plant, monitor, and maintain SAV, project evaluation survey | 3,000,000 |
| Fixed Capital Construction/Major Renovation | | |
| ☐Construction/Renovation/Land/Planning Engineering | | |
| TOTAL | , | 3,000,000 |

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

The expected benefits include 1) Water quality improvements and species recruitment to the area (fish, crustaceans, amphibians, marine mammals, etc...) for continued enjoyment of recreational as well as commercial activities crucial to this area (boating, fishing, crabbing, tourism). 2) Tourism dollar increases from restoration of pristine submerged habitat. 3) Increased public usage of improved habitat. 4) Increase in commercial fisheries. 5) Expected increase in property values, commercial development, and tax revenues due to investment in water quality of Outstanding Florida Waterway 6) Increase in community support for ongoing ecosystem management and protection

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

<u>The citizens and the economy of the State of Florida</u>, <u>Citrus County, and the City of Crystal River</u>, <u>as well as</u> the 350,000 local, national and international visitors per year that visit Kings Bay and the Crystal River waters.

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

The advancement of the statewide goal specific to the Restoration of an impaired Florida Outstanding Waterway (Kings Bay and the Crystal River) as enumerated in the SWFWMD SWIM Plan and Citrus/Hernando Waterways Plan. Additionally, water quality improvements and species recruitment to the area (fish, crustaceans, amphibians, marine mammals, etc.), downstream habitat improvement, create a food storage buffer for thermal sensitive marine mammals.

- 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?

 _Loss of funding
- 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.

 None



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| 13. | Rec | uestor | Contact | Inform | nation: |
|-----|-----|--------|---------|--------|---------|
|-----|-----|--------|---------|--------|---------|

- a. Name: Michelle Sivilich
- **b.** Organization: Save Crystal River, Inc.
- c. Email: dr.michellesivilich@savecrystalriver.com
- d. Phone Number: (352)257-6359

| 14 | Recipient | Contact | Inform | ation: |
|-----|-----------|---------|----------|----------|
| 14. | recipient | Contact | 11110111 | ıatıvıı. |

- a. Organization: Save Crystal River, Inc.
- b. County: Citrus
- c. Organization Type:
 - O For Profit
 - Non Profit 501(c) (3)
 - O Non Profit 501(c) (4)
 - O Local Entity
 - O University or College
 - O Other (Please specify)
- d. Contact Name: Lisa Moore
- e. E-mail Address: lisa@gulfatlanticequipment.com
- f. Phone Number: (352)302-1004

| 15. I | If there is | a registered | lobbvist. | fill out the | lobbvist i | nformation | below. |
|--------------|-------------|--------------|-----------|--------------|------------|------------|--------|
|--------------|-------------|--------------|-----------|--------------|------------|------------|--------|

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

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



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□Rural Area of Opportunity (s. 288-0656, Florida Statutes)

□N/A

18. What is the status of construction?

We have completed the Pilot Project (FY 15-16), monitoring and maintenance ongoing in the Phase 1A Project (FY16-17), and near completion of detrital material removal in the Phase 1B (FY 17-18)

19. What percentage of construction has been completed?

There are 15.43 acres out of 88 acres cleaned for a total of 17.5% complete.

20. What is the estimated completion date of construction?

The planned year of completion is 2023.