

LFIR # 1672

1.	Project Title	Miami-Dade - Seaweed - F	Funding Request for Removal		
2.	Senate Sponsor	Jason Pizzo			
3.	Date of Request	12/09/2019			
4.	Project/Program Description				
	Removal of excess set	aweed accumulations on beaches	located in Miami-Dade County		
5.	State Agency to r	receive requested funds	Department of Environmental Protection		

6. Amount of the Nonrecurring Request for Fiscal Year 2020-2021

State Agency contacted?

Type of Funding	Amount
Operations	3,200,000
Fixed Capital Outlay	000
Total State Funds Requested	3,200,000

○ Yes ● No

7. Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	3200000	75.0 %
Matching Funds		
Federal	00	0 %
State (excluding the amount of this request)	00	0 %
Local	1,042,500	25 %
Other	00	0 %
Total Project Costs for Fiscal Year 2020-2021	4,242,500	100 %

8. **Has this project previously received state funding?** • Yes • No If yes, provide the most recent instance:

Fiscal Year	Ame	ount	Specific		
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	Vetoed	

9. Is future-year funding likely to be requested? O Yes O No

If yes, indicate nonrecurring amount per year.



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10. Details on how the requested state funds will 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: Oth	er	
Salary and Benefits		
Expense/Equipment/ Travel/Supplies/Other		
Consultants/Contracted Services/Study	Cost of removal and disposal of sargassum seaweed from high accumulation areas	3,200,000
Fixed Capital Construc	tion/Major Renovation:	
Construction/Renovation/ Land/Planning Engineering		
Total State Funds Re	equested (must equal total from question #6)	3,200,000



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11. Program Performance

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

Maintaining the quality of the beaches along beaches in Miami-Dade County to support the tourist industry as well as maintain resident's ability to enjoy the natural beauty of the beaches.

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

Removal of excess amounts of seaweed at three key locations along Miami-Dade County Beaches that have begun experiencing larger than normal volumes of sargassum.

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

Maintaining the cleanliness of the beaches of Miami-Dade County which will support both local and State economy.

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

The target population is both residents of Miami-Dade County and the visitors. According to the Greater Miami Convention and Visitors Bureau, in 2018 over 23M people visited the greater Miami area with Miami Beach being the most visited neighborhood.

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

A recent survey, conducted by the Visitors Bureau, indicated that Miami had 23.3 million visitors last year. Visitors continue traveling to Miami, primarily for leisure/vacation purposes making up 84% of visitors. Of those who visited, 57% visited Miami Beach. This equates to approximately 13.28 million annual visitors to our beaches. Monies into the economy equate to \$18 billion. Maintaining residents and visitors ability to enjoy the beaches of Miami-Dade and support the tourist industry, both for the County and the State. Seaweed removal will be measured in cubic yards removed.

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 in the contract?

None. Standard liquidated damages would be applied.



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12. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

	N/A				
F	Requestor Contac	t Information			
â	a. First Name	Maria	Last Name	Nardi	
k	o. Organization	Miami-Dade Parks, Recreation an	d Open Space	S	
c. E-mail Address Maria.Nardi@miamidade.gov					
C	d. Phone Number	(305)755-7903	Ext.		
F	Recipient Contact Information				
	a. Organization	Miami-Dade Parks, Recreation and Open Spaces Department			
k	o. Municipality and	nd County Miami-Dade			
c	c. Organization Typ	De			
	 For-profit E 	ntity			
	O Non-Profit	501(c) (3)			
	O Non-Profit \$	501(c) (4)			
	Local Entity	1			
	 University of 	or College			
	Other (plea	se specify)			
c	d. First Name	Nikki	Last Name	Anderson	
e	e. E-mail Address	nikki.anderson@miamidade.gov			
f	Phone Number	(305)9612790			
	Lobbyist Contact I	Information			
	a. Name	Diana Ferguson			
I	b. Firm Name	Rutledge Ecenia			
(c. E-mail Address				
(d. Phone Number	(850)6816788	Ext.		