

LFIR # 1633

1. Project Title	Sebastian Inlet N Improvements	North and South	Jetty Maintenance and	Safety	
2. Senate Sponsor	Debbie Mayfield				
3. Date of Request	02/14/2023				
4. Project/Program De	escription				
damaged by storms maintaining safe nav SISP's website state	. The jetties are loca vigation and providi es that this park attra ude structural maint	ated within the p ng recreational o acts "visitors fro enance to jetty o	concrete decking and pil	state Park (SISP) an oximately 1 million and addition to its regions	d are critical to annual visitors. The al and statewide visitors.
5. State Agency to red	ceive requested fu	i nds Depa	rtment of Environmental	Protection	
State Agency conta	acted? Yes				
6. Amount of the Non	recurring Request	for Fiscal Year	2023-2024		_
Type of Funding			Amo	ount	
Operations				0	
Fixed Capital Outlay				2,000,000	1
Total State Funds I	Requested			2,000,000	
7. Total Project Cost f	or Fiscal Year 202	3-2024 (includi	ng matching funds ava	nilable for this proj	ect)
7. Total Project Cost f Type of Funding	or Fiscal Year 202	3-2024 (includi	ng matching funds ava Amount	nilable for this proj Percentage	ect)
Type of Funding Total State Funds R		,]
Type of Funding Total State Funds R Matching Funds		,	Amount 2,000,000	Percentage 40%	
Type of Funding Total State Funds R Matching Funds Federal	equested (from que	estion #6)	Amount 2,000,000	Percentage 40%	
Type of Funding Total State Funds R Matching Funds Federal State (excluding the	equested (from que	estion #6)	Amount 2,000,000 0	Percentage 40% 0% 0%	
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local	equested (from que	estion #6)	Amount 2,000,000 0 3,000,000	Percentage 40% 0% 0% 60%	
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other	equested (from que amount of this requ	estion #6)	Amount 2,000,000 0 3,000,000 0	Percentage 40% 0% 0% 60% 0%	
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local	equested (from que amount of this requ	estion #6)	Amount 2,000,000 0 3,000,000	Percentage 40% 0% 0% 60%	
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other	equested (from que amount of this requ s for Fiscal Year 20	estion #6) uest) 023-2024	Amount 2,000,000 0 3,000,000 0	Percentage 40% 0% 0% 60% 0%	
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre	amount of this requested (from quested (from quested (from quested from quested fro	estion #6) uest) 023-2024	Amount 2,000,000 0 3,000,000 5,000,000 No Specific	Percentage 40% 0% 0% 60% 0%	
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre	amount of this requested (from quested (from quested (from quested from quested fro	estion #6) uest) 023-2024 state funding?	Amount 2,000,000 0 3,000,000 5,000,000 No Specific	Percentage 40% 0% 0% 60% 100%	
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre	amount of this requested for Fiscal Year 20 eviously received a	pestion #6) uest) 023-2024 state funding?	Amount 2,000,000 0 3,000,000 5,000,000 No Specific	Percentage 40% 0% 0% 60% 100%	
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre	amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received amount of this requested for Fiscal Year 20 eviously received for F	pestion #6) Destion #6) Destion #6) Destion #6) Destion #6) Destion #6)	Amount 2,000,000 0 3,000,000 5,000,000 No Specific	Percentage 40% 0% 0% 60% 100%	
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу)	amount of this requested for Fiscal Year 20 eviously received amount of this requested services for Fiscal Year 20 eviously received amount of this requested services for Fiscal Year 20 eviously received se	estion #6) Destion #6) Destion #6) Destion #6) Destion #6) Destion #6) Destion #6)	Amount 2,000,000 0 3,000,000 5,000,000 No Specific Appropriation #	Percentage 40% 0% 0% 60% 100%	
Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre Fiscal Year (уууу-уу) 9. Is future funding like a. If yes, indicate n	equested (from que amount of this requested seviously received sevious	estion #6) D23-2024 State funding? Dunt Nonrecurring ed? Int per year.	Amount 2,000,000 0 3,000,000 5,000,000 No Specific Appropriation #	Percentage 40% 0% 0% 60% 100%	



LFIR # 1633

No	
If yes, indicate the amount of funds received and what the funds were used for.	

Complete questions 11 and 12 for Fixed Capital Outlay Projects

- 11. Status of Construction
 - a. What is the current phase of the project?

b. Is the project "shovel ready" (i.e permitted)?

- c. What is the estimated start date of construction?
- d. What is the estimated completion date of construction?

No

March 2024

June 2025

12. List 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.

Sebastian Inlet District Commission - Elected Board

13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	The funding will be used to to rehabilitate the north and south jetties, including structural maintenance to jetty concrete decking and piles, replacement of storm-protecting armor stone, and safety enhancements to jetty railings and sidewalks.	2,000,000
Total State Funds Requested (must equal total from question #6)		

14. Program Performance

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



LFIR # 1633

The requested funds will be used to rehabilitate areas of the north and south jetties that have deteriorated and been damaged by storms. The jetties are located within the popular Sebastian Inlet State Park (SISP) and are critical to maintaining safe navigation and providing recreational opportunities to the approximately 1 million annual visitors. The SISP's website states that this park attracts "visitors from around the globe" in addition to its regional and statewide visitors. Specific repairs include structural maintenance to jetty concrete decking and piles, replacement of storm protecting armor stone, and safety enhancements to jetty railings and sidewalks.

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

The Sebastian Inlet State Park is one of the most visited parks within the State of Florida. Having safe amenities available is critical to serving the park's daily visitors.

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

Uninterrupted use of the park's key recreational features such as boating, fishing, birding, surfing and many other outdoor and commercial activities.

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

The ~1M annual park visitors and others who navigate the Sebastian Inlet.

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

Annual park attendance and uninterrupted navigation will benefit from the project. Sebastian Inlet State Park admission/revenue will be used to measure the outcome.

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?

In the event the Sebastian Inlet District fails to meet the deliverable or performance requirements, applicable penalties will be determined by standard contract conditions and/or an appropriate Corrective Action Plan. A specific penalty could be a reduction in the funded appropriation.

15. Requester Contac	t Informati	ion			
a. First Name	James		Last Name	Gray	
b. Organization	Sebastia	Sebastian Inlet District			
c. E-mail Address	jgray@sit	jgray@sitd.us			
d. Phone Number	(321)591	-9216	Ext.		
16. Recipient Contact	Information	on			
a. Organization	Sebastia	Sebastian Inlet District			
b. Municipality and County Brevard					
c. Organization Ty	pe				
□For Profit Entity					
□Non Profit 501(d	c)(3)				
□Non Profit 501(d	c)(4)				
□Local Entity					



LFIR # 1633

□University or Co	llege		
☑Other (please sp	pecify) Independent Specia	l District	
d. First Name	James	Last Name	Gray
e. E-mail Address	jgray@sitd.us		
f. Phone Number	(321)591-9216		
17. Lobbyist Contact I	nformation		
a. Name	Martin (Chris) Lyon		
b. Firm Name	Lewis Longman & Walker	PA	
c. E-mail Address	clyon@llw-law.com		
d. Phone Number	(850)222-5702		
18. Have you applied f	for alternative state fundir	ng?	
		.9.	
☐ Waste Water R	evolving Loan		
□ Drinking Water	Revolving Loan		
☐ Small Commun	ity Wastewater Treatment (Grant	
☐ Other (please s	pecify)		
☑ N/A			
9. What is the popula	tion economic status?		
☐ Financially Disa	advantaged Community (ch.	. 62-552, F.A	ı.C)
☐ Financially Disa	advantaged Municipality (ch	. 62-552, F. <i>A</i>	4.C)
☐ Rural Area of E	conomic Concern		
☐ Rural Area of O	opportunity (s. 288.0656, Flo	orida Statute	s)
☑ N/A			
20. What is the status	of construction?		
Project design is u	underway, which includes re	egulatory con	nsultations
21. What percentage o	of the construction has be	en complete	ed?
0			

22. What is the estimated completion date of construction?



LFIR # 1633

06/30/25			