

LFIR # 1533

1. Project Title	St. Lucie River S Phase 2 North Fo		atic V	egetation Enhance	ment Project -	
2. Senate Sponsor	Gayle Harrell					
3. Date of Request	2/14/2025					
•						
4. Project/Program De	.				450 "	
between Cape Cana caused by decades In 2011, a "super-blo Lucie River (NFSLR	averal and Stuart. The of increasing anthro com" formed through) is a freshwater to he monitor 20 acres	ne IRL has suff ppogenic activit hout the IRL ca brackish water of submerged	ered a ies, su using river t	a decline in water quuch as development its seagrasses to s that runs into the Ind	uality due to a serie t, septic system disc uffer a massive die dian River Lagoon.	charges, and land runoff. -off. The North Fork St
5. State Agency to red	ceive requested fu	nds Depa	artme	nt of Environmental	Protection	
State Agency conta	ncted? No					
6. Amount of the Nonr	recurring Request	for Fiscal Yea	r 202	5-2026		
Type of Funding				Amo	ount	
Operating					862,000	
Fixed Capital Outlay			0			
Total State Funds Requested					862,000	
7. Total Project Cost f	or Fiscal Year 202	5-2026 (includ	ing m	natching funds ava	ilable for this proj	ect)
7. Total Project Cost for	or Fiscal Year 202	5-2026 (includ	ing m	atching funds ava	ilable for this proj	ect)
Type of Funding Total State Funds R		,	ing m		• •]
Type of Funding Total State Funds R Matching Funds		,	ing m	Amount 862,000	Percentage 80%	
Type of Funding Total State Funds R Matching Funds Federal	equested (from que	stion #6)	ing m	Amount 862,000	Percentage 80%	
Type of Funding Total State Funds R Matching Funds Federal State (excluding the	equested (from que	stion #6)	ing m	Amount 862,000	Percentage 80% 0% 0%	
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Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project pre If yes, provide the I Fiscal Year (уууу-уу) 9. Is future-year fundi	amount of this requested (from quested (from quested (from quested amount of this requested seriously received amost recent instantian Recurring amount on recurring amount on recurring amount amount amount from the serious amount amo	stion #6) 25-2026 state funding? ace: Nonrecurrir uested? nt per year.	ng [Amount 862,000 0 0 213,000 1,075,000 No Specific Appropriation # Yes 1,500,000	Percentage 80% 0% 0% 20% 100%	



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Complete questions 10 and 11 for Fixed Capital Outlay Projects

Planning	O Design	Construction	O N/A		
o. Is the projec	t "shovel ready"	(i.e permitted)?			
c. What is the e	stimated start da	te of construction?	4/1/2026		
d. What is the e	estimated comple	tion date of construc	tion? 6/1/2026		
e. What funding	g stream will be ບ	sed for ongoing oper	rations and maintenand	ce of the project?	
List the owne		o receive, directly or	indirectly, any fixed ca	pital outlay funding. I	nclude

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

Spending Category	Description	Amount	
Administrative Costs:			
Executive Director/Project Head Salary and Benefits	Administration, Contracting, and Public Outreach	12,000	
Other Salary and Benefits		0	
Expense/Equipment/Travel/Supplies/ Other		0	
Consultants/Contracted Services/Study		0	
Operational Costs			
Salary and Benefits		0	
Expense/Equipment/Travel/Supplies/ Other		0	
Consultants/Contracted Services/Study	Nursery grown freshwater SAV production, permitting, installation of seagrass, protection of planting units using herbivory exclusion cages, maintenance of herbivory exclusion cages for three years, monthly monitoring for 12 months, and regular progress reporting to provide updates on SAV expansion.	850,000	
Fixed Capital Construction/Majo	r Renovation:		
Construction/Renovation/Land/ Planning Engineering		0	
Total State Funds Requested (must equal total from question #6) 862,0			

13. Program Performance

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

The specific goal of this project is to greatly increase fisheries production, natural water filtration, and to provide much needed forage for manatees.

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



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The stated goals will be accomplished by the establishment of self-sustaining meadows of submerged aquatic vegetation. Native submerged aquatic vegetation will be planted, protected, and maintained in the St. Lucie River where it

previously flourished.

c. What direct services will be provided to citizens by the appropriation project? Submerged aquatic vegetation is critical to fisheries productivity, water filtration, bacteria suppression, and sediment stabilization. The citizens of Florida will benefit from the increase in fisheries, harmful algal bloom reduction, and a reduction of required maintenance dredging. d. Who is the target population served by this project? How many individuals are expected to be served? All citizens of Florida will benefit from tourism revenues derived from healthy estuaries and cleaner water. e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured? The benefits of this project will be accomplished through independent submerged aquatic vegetation expansion monitoring. 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? If a deliverable is not achieved funds would be withheld until the deliverable is met. 14. Is this project related to mitigation, response, or recovery from a natural disaster? No a. If Yes, what phase best describes the project? Mitigation (reducing or eliminating potential loss of life or property) Response (addressing the immediate and short-term effects of a natural disaster) Recovery (assisting communities return to normal operations, including rebuilding damaged infastructure) b. Name of the natural disaster (or Executive Order # for events not under a federal declaration): 15. Has the entity applied for or received federal assistance for this project? ☐ Yes, Applied ☐ Yes, Received □ No □ No, but intends to apply a. If yes, provide the FEMA project worksheet ID#: b. Provide the total project cost listed on the FEMA project worksheet:

16. Has the entity applied for or received state assistance for this project (other than this request)?

☐ Yes, Applied



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☐ Yes, Received					
□ No					
☐ No, but intends	to apply				
a. If yes, specify the Commerce):	ne program and	state agency (ex. Loca	al Government Emergen	cy Bridge Loan, Deր	partment of
Indian River Lago	on Water Quality	Improvement Grant			
Please comple	te questions	s 17 through 21	for Water Project	s only.	
17. Have you been av	varded or applied	d for alternative state	funding for this project?	?	
☐ Water Quality	Improvement Gra	int Program			
☐ Resilient Florid	da Grant Program				
□ Wastewater R	evolving Loan				
□ Drinking Wate	r Revolving Loan				
☐ Small Commu	nity Wastewater T	Freatment Grant			
☑ Other (please)	specify, ex. Altern	native Water Supply Gra	ants) ater Quality Improve	ment Grant	
□ N/A					
18. What is the popul	ation economic	status?			
☐ Financially Dis	advantaged Com	munity (ch. 62-552, F.A	A.C)		
☐ Financially Dis	advantaged Muni	icipality (ch. 62-552, F.	A.C)		
☐ Rural Area of	Economic Concer	'n			
☐ Rural Area of	Opportunity (s. 28	8.0656, Florida Statute	s)		
☑ N/A					
19. What is the status	s of construction	1?			
In-Progress					
20. What percentage	of the construct	ion has been complet	ed?		
10.7%					
21. What is the estim	ated completion	date of construction	? 6/1/2026		
22. Requester Contac	ct Information				
a. First Name	Brett	Last Name	Fitzgerald		



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b. Organization	Angler Action Foundation, Inc.					
c. E-mail Address	brett@angleractionfoundation.org					
d. Phone Number	(561)707	-8923	Ext.			
3. Recipient Contact Information						
a. Organization	Angler Action Foundation, Inc.					
b. Municipality and	b. Municipality and County Saint Lucie					
c. Organization Type						
□For Profit Entity						
☑Non Profit 501(d	☑Non Profit 501(c)(3)					
□Non Profit 501(d	:)(4)					
□Local Entity						
□University or Co	□University or College					
□Other (please specify)						
d. First Name	Brett		Last Name	Fitzgerald		
e. E-mail Address	brett@an	gleractionfounda	tion.org			
f. Phone Number	(561)707	-8923	Ext.			
24. Lobbyist Contact Information						
a. Name	Natalie F	ausel				
b. Firm Name	Arrow Group Consulting					
c. E-mail Address	natalie@anfieldflorida.com					
d Phone Number	(561)317	-0889				

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.