

LFIR # 3207

| . Project Title | Port St. Joe Port Authority Bird Island Jetty |
|-----------------|---|
|-----------------|---|

2. Senate Sponsor Corey Simon

3. Date of Request 3/4/2025

4. Project/Program Description

This project will build a jetty that helps protect ships from hitting the seawall from harsh winds and waves. By building this breakwater, it will not only protect the ships that are being built there, but also roughly 200 employees who are working on these ships. Additionally, it can protect any boater trying to enter the marina from harsh winds and waves.

5. State Agency to receive requested funds

Department of Environmental Protection

State Agency contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026

| Type of Funding | Amount |
|-----------------------------|-----------|
| Operating | 0 |
| Fixed Capital Outlay | 5,000,000 |
| Total State Funds Requested | 5,000,000 |

7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)

| Type of Funding | Amount | Percentage |
|--|-----------|------------|
| Total State Funds Requested (from question #6) | 5,000,000 | 100% |
| Matching Funds | | |
| Federal | 0 | 0% |
| State (excluding the amount of this request) | 0 | 0% |
| Local | 0 | 0% |
| Other | 0 | 0% |
| Total Project Costs for Fiscal Year 2025-2026 | 5,000,000 | 100% |

8. Has this project previously received state funding? If yes, provide the most recent instance:

| Fiscal Year | Amount | | Specific | Vetoed |
|-------------|-----------|--------------|-----------------|--------|
| (уууу-уу) | Recurring | Nonrecurring | Appropriation # | |
| | | | | |

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

| 1 | | |
|---|--|--|
| | | |

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction

No

No

| The Florida Senate |
|----------------------------------|
| Local Funding Initiative Request |
| Fiscal Year 2025-2026 |

| a. What is the current phase of the project? | | | | | |
|--|----------|--------------|-------|--|--|
| 📀 Planning | 🔘 Design | Construction | O N/A | | |
| b. Is the project "shovel ready" (i.e permitted)? No | | | | | |
| c. What is the estimated start date of construction? 06/01/2025 | | | | | |
| d. What is the estimated completion date of construction? 02/01/2026 | | | | | |
| e. What funding stream will be used for ongoing operations and maintenance of the project? | | | | | |
| Operations at the Port of Port St. Joe and Gulf County Board of County Commissioners | | | | | |

11. 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.

Port St. Joe Port Authority id the sole enity

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

| Spending Category | Description | Amount | | | |
|---|--|-----------|--|--|--|
| Administrative Costs: | 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 | | | | | |
| 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 | This project will build a jetty that helps protect ships from hitting the seawall from harsh winds and waves | 5,000,000 | | | |
| Total State Funds Requested (must equal total from question #6) 5,000,000 | | | | | |

13. Program Performance

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

The Bird Island Jetty will provide breakwater protection for Port St. Joe shipyard that opened in 2020. The Jetty will reduce the impacts of harsh winds and waves pushing the ships into the seawall and damaging them. In addition, the breakwater will provide the shipbuilding employees with a safer work environment by decreasing the impacts of harsh weather and waves. Project is consistent with State goals of growing a diversified base of businesses in Florida and enhancing the State's port capacity.

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

To build the jetty to protect the activities of Eastern Shipbuilding and the operation of the Port South Marina.

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



Enhance the working condition of the 300 to 600 employees working at the Port where there is now three ships being worked on. Increase safety of the recreational boaters in St. Joseph Bay.

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

The employees working with Eastern Shipbuilding and Point South Marina as well as recreational boaters in Saint Joseph Bay

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

Reducing the down time of activities at the Port

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?

Foregoing of asking for additional funds

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)
- **D** 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
- □ Yes, Received
- 🗆 No
- □ No, but intends to apply



a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

Please complete questions 17 through 21 for Water Projects only.

17. Have you been awarded or applied for alternative state funding for this project?

- □ Water Quality Improvement Grant Program
- Resilient Florida Grant Program
- U Wastewater Revolving Loan
- Drinking Water Revolving Loan
- □ Small Community Wastewater Treatment Grant
- □ Other (please specify, ex. Alternative Water Supply Grants)
- ☑ N/A

18. 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
- □ Rural Area of Opportunity (s. 288.0656, Florida Statutes)
- D N/A

19. What is the status of construction?

Has not started

20. What percentage of the construction has been completed?

0%

21. What is the estimated completion date of construction?

02/01/2026

22. Requester Contact Information

| a. First Name | Guerry | Last Name Magidson |
|-------------------|---------------------------|--------------------|
| b. Organization | Port Saint Joe Port Autho | rity |
| c. E-mail Address | gmagidson@portofportstj | oe.com |
| d. Phone Number | (850)227-4855 | Ext. |



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| 23. Recipient Contact | Information | | | | | |
|----------------------------------|---|-----------|----------|--|--|--|
| a. Organization | a. Organization Port St. Joe Port Authority | | | | | |
| b. Municipality and | b. Municipality and County Gulf | | | | | |
| c. Organization Ty | ре | | | | | |
| □For Profit Entity | | | | | | |
| □Non Profit 501(c | □Non Profit 501(c)(3) | | | | | |
| □Non Profit 501(c | :)(4) | | | | | |
| □Local Entity | | | | | | |
| □University or Co | llege | | | | | |
| ⊠Other (please sp | pecify) Special District Auth | nority | | | | |
| d. First Name | Guerry | Last Name | Magidson | | | |
| e. E-mail Address | gmagidson@portofportstj | pe.com | | | | |
| f. Phone Number | (850)227-4855 | Ext. | | | | |
| 24. Lobbyist Contact Information | | | | | | |
| a. Name | None | | | | | |
| b. Firm Name | | | | | | |
| c. E-mail Address | | | | | | |
| d. Phone Number | | | | | | |

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