

1. Project Title

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

Gulf Coast Drone Bivalve Seeding Project

**LFIR # 3303** 

| The funding will be used for a project using heavy lift drones to deploy bivalve (clams, oyster and existing oyster habitat and seagrass meadows with more coverage and density than traditional may start rejuvenation of depleted areas. The goal is to deploy over 30-40 million 1-6 mm bivalve state Agency to receive requested funds  The funding Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  Department of Agriculture and Consumer Service state Agency contacted?  Type of Funding  |
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| The funding will be used for a project using heavy lift drones to deploy bivalve (clams, oyster and existing oyster habitat and seagrass meadows with more coverage and density than traditional may be used for expected areas. The goal is to deploy over 30-40 million 1-6 mm bivalve that expense to receive requested funds  Department of Agriculture and Consumer Service that expense contacted?  No  mount of the Nonrecurring Request for Fiscal Year 2025-2026  Type of Funding  Department of Agriculture and Consumer Service that expense contacted?  Amount  Department of Agriculture and Consumer Service that expense contacted?  Amount  Department of Agriculture and Consumer Service that expense contacted?  Sype of Funding  Department of Agriculture and Consumer Service that expense contacted areas.  |
| existing oyster habitat and seagrass meadows with more coverage and density than traditional management of depleted areas. The goal is to deploy over 30-40 million 1-6 mm bivalve state Agency to receive requested funds  The goal is to deploy over 30-40 million 1-6 mm bivalve state Agency to receive requested funds  Department of Agriculture and Consumer Service  The goal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The mount of Agriculture and Consumer Service  The goal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The mount of Agriculture and Consumer Service  The goal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The mount of Agriculture and Consumer Service  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The mount of the Nonrecurring Request for Fiscal Year 2025-2026  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The mount of the Nonrecurring Request for Fiscal Year 2025-2026  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted?  No  The poal is to deploy over 30-40 million 1-6 mm bivalve state Agency contacted? |
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| Type of Funding  Operating  2,500,00  Tixed Capital Outlay   |
| Deerating 2,500,00 Eixed Capital Outlay  |
| ixed Capital Outlay  |
|  |
| otal State Funds Requested 2,500,00  |
|  |
| otal Project Cost for Fiscal Year 2025-2026 (including matching funds available for this pro-  |
| Total State Funds Requested (from question #6) 2,500,000 1009  |
| Matching Funds   |
| Federal 0 09   |
| State (excluding the amount of this request) 0 09  |
| ocal 0 09  |
| Other 0 09   |
|  |
| otal Project Costs for Fiscal Year 2025-2026 2,500,000 100%  |
| las this project previously received state funding?  Yes  yes, provide the most recent instance:   |
| las this project previously received state funding?  |

### Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction



1

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| Planning        | O Design          | Construction                                     | ○ N/A   |
|-----------------|-------------------|--|---|
| Is the project  | "shovel ready"    | (i.e permitted)?                                 |   |
| What is the es  | stimated start da | te of construction?                              |   |
| . What is the e | stimated comple   | tion date of constru                             | ction?  |
| . What funding  | stream will be u  | sed for ongoing ope                              | erations and maintenance of the project?  |
|                 |                   |  |   |
|                 |                   |  |   |
|                 |                   | o receive, directly or<br>rs of the facility and | <ul> <li>indirectly, any fixed capital outlay funding. Include<br/>the entity.</li> </ul> |
|                 |                   |  | -   |

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

a. What is the current phase of the project?

| Spending Category   | Description  |           |  |  |
|---|--|-----------|--|--|
| Administrative Costs:   |  |           |  |  |
| Executive Director/Project Head Salary and Benefits             | Construction oversight and deliverables management/project and phase planning  | 375,000   |  |  |
| Other Salary and Benefits                                       | Field staff for drone deployment locations   | 400,000   |  |  |
| Expense/Equipment/Travel/Supplies/Other                         |  | 0         |  |  |
| Consultants/Contracted Services/Study                           |  | 0         |  |  |
| Operational Costs   |  |           |  |  |
| Salary and Benefits   |  | 0         |  |  |
| Expense/Equipment/Travel/Supplies/<br>Other                     |  | 0         |  |  |
| Consultants/Contracted<br>Services/Study                        | Permitting, construction planning and oversight, monitoring, Drone lease and equipment maintenance, oyster and clam seed, additional supplies, Internships, monitoring, permitting and data collection | 1,725,000 |  |  |
| Fixed Capital Construction/Majo                                 | r Renovation:  |           |  |  |
| Construction/Renovation/Land/<br>Planning Engineering           |  | 0         |  |  |
| Total State Funds Requested (must equal total from question #6) |  |           |  |  |

#### 13. Program Performance

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

The goal is to deploy over 30-40 million 1-6 mm bivalve seeds.

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

The funding will be used for a project using heavy lift drones to deploy bivalve (clams, oyster and scallop) seed into existing oyster habitat and seagrass meadows with more coverage and density than traditional methods previously used to jump start rejuvenation of depleted areas.

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



14.

15.

16.

☐ Yes, Received

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The project will support restoration oysters and other bivalve habitat, improving water quality and the overall health of the

| ecosystem. This will also help support the local economy and tourism. The project will also utilize internships from State University students and provide future employment for students.   |
|--|
| d. Who is the target population served by this project? How many individuals are expected to be served?  |
| General population; university and college students.   |
| e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will   |
| be measured?   |
| The project will support restoration oysters and other bivalve habitat, improving water quality and the overall health of the ecosystem. This will also help support the local economy and tourism. The project will also utilize internships from State University students and provide future employment for students. |
| f. What are the suggested penalties that the contracting agency may consider in addition to its standard penaltic<br>for failing to meet deliverables or performance measures provided for in the contract?  |
| All seed stock will be procured from FDACS certified Aquaculture facilities and inspected by staff prior to deployment. Detailed maps and plans will also be approved. If there is a failure to meet deliverables or performance measures the project will not move forward and reimbursement will not be provided.      |
| Is this project related to mitigation, response, or recovery from a natural disaster? No   |
| . 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)   |
| . Name of the natural disaster (or Executive Order # for events not under a federal declaration):  |
|  |
| Has the entity applied for or received federal assistance for this project?  |
| □ Yes, Applied   |
| □ Yes, Received  |
| □ No   |
| □ No, but intends to apply   |
| . If yes, provide the FEMA project worksheet ID#:  |
|  |
| . Provide the total project cost listed on the FEMA project worksheet:   |
|  |
| Has the entity applied for or received state assistance for this project (other than this request)?  |
| □ Yes, Applied   |



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| □ No                              |                                    |                   |               |              |            |              |                   |
|-----------------------------------|------------------------------------|-------------------|---------------|--------------|------------|--------------|-------------------|
| ☐ No, but intends to              | o apply                            |                   |               |              |            |              |                   |
| a. If yes, specify the Commerce): | e program                          | and state ager    | ncy (ex. Loca | ıl Governmen | t Emergenc | y Bridge Loa | an, Department of |
|                                   |                                    |                   |               |              |            |              |                   |
|                                   |                                    |                   |               |              |            |              |                   |
| 17. Requester Contact             | Informati                          | ion               | _             |              |            | -            |                   |
| a. First Name                     | Beau                               |                   | Last Name     | Williams     |            |              |                   |
| b. Organization                   | AquaTec                            | h Eco Consultan   | ts            |              |            |              |                   |
| c. E-mail Address                 | Beau@A                             | quaTechEco.cor    | n             |              |            |              |                   |
| d. Phone Number                   | d. Phone Number (813)918-6169 Ext. |                   |               |              |            |              |                   |
|                                   |                                    |                   |               |              |            |              |                   |
| 18. Recipient Contact             | Informatio                         | on                |               |              |            |              |                   |
| a. Organization                   | Aquatic R<br>Alliance              | Restoration and ( | Conservation  |              |            |              |                   |
| b. Municipality and               | l County                           | Statewide         |               |              |            |              |                   |
| c. Organization Ty                | ре                                 |                   |               |              |            |              |                   |
| □For Profit Entity                |                                    |                   |               |              |            |              |                   |
| ☑Non Profit 501(d                 | :)(3)                              |                   |               |              |            |              |                   |
| □Non Profit 501(d                 | :)(4)                              |                   |               |              |            |              |                   |
| □Local Entity                     |                                    |                   |               |              |            |              |                   |
| □University or Co                 | llege                              |                   |               |              |            |              |                   |
| □Other (please sp                 | pecify)                            |                   |               |              |            |              |                   |
| d. First Name                     | Jeff                               |                   | Last Name     | Fuqua        |            |              |                   |
| e. E-mail Address                 | JF@arca                            | usa.org           |               |              |            |              |                   |
| f. Phone Number                   | (407)233                           | -4235             | Ext.          |              |            |              |                   |
| 19. Lobbyist Contact I            | nformatio                          | n                 |               |              |            |              |                   |
| a. Name                           | Leslie Ames Reed                   |                   |               |              |            |              |                   |
| b. Firm Name                      | Brightwater Strategies Group PLLC  |                   |               |              |            |              |                   |
| c. E-mail Address                 | leslie@brightwaterstrategies.com   |                   |               |              |            |              |                   |
| d. Phone Number                   | (757)870-                          | -4604             |               |              |            |              |                   |



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